2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 08, 2007
Secretary of State

DOCUMENT# M02000001991

Entity Name: CHECK POINT HR FLORIDA, LLC

Current Principal Place of Business:

4025 TAMPA ROAD
SUITE 1107A
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

4025 TAMPA ROAD
SUITE 1107A
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: 32-0220269 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	ROSENTHAL, STEVEN	
Address:	2035 LINCOLN HIGHWAY, STE 1080	
City-St-Zip:	EDISON, NJ 08817	
Title:	MGRM	( ) Delete
Name:	PADVA, TIMOTHY	
Address:	2035 LINCOLN HIGHWAY, STE 1080	
City-St-Zip:	EDISON, NJ 08817	
Title:	PRES	( ) Delete
Name:	ARCARO, ANTHONY M SR	
Address:	4025 TAMPA ROAD SUITE 1107A	
City-St-Zip:	OLDSMAR, FL 34677	
Title:	VP	( ) Delete
Name:	ARCARO, ANTHONY M JR	
Address:	4025 TAMPA ROAD SUITE 1107A	
City-St-Zip:	OLDSMAR, FL 34677	
Title:	VP	( ) Delete
Name:	ARCARO, JOHN D	
Address:	4025 TAMPA ROAD	
City-St-Zip:	OLDSMAR, FL 34677	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANTHONY M ARCARO PRES 01/08/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date