2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000006214

FILED Nov 11, 2005 Secretary of State

Entity Name: BROWARD COUNTY ASSOCIATION OF PAYROLL PROFESSIONALS INC.

Current Principal Place of Business:

1040 BAYVIEW DR - STE 522
FT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address: New Mailing Address:

1040 BAYVIEW DR - STE 522 FT LAUDERDALE, FL 33304

FEI Number: 41-2137277 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BUSINESS FILINGS INCORPORATED 1203 GOVERNORS SQUARE BLVD SUITE 101 TALLAHASSEE, FL 323012960 US STERNBACH, TRACY 4935 KENSINGTON CIRCLE CORAL SPRINGS, FL 33076 US

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: TRACY STERNBACH 11/11/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete **PRES** () Change (X) Addition PEREZ. MARIA G Name: Name: Address: Address: 2230 NE 56TH PL City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33306 Title: Title: () Change (X) Addition () Delete Name: Name: BRINKMAN, DONNA Address: Address: 10343 SW 50TH COURT City-St-Zip: City-St-Zip: COOPER CITY, FL 33328 Title: () Delete Title: **TREA** () Change (X) Addition STERNBACH, TRACY Name: Name: 4935 KENSINGTON CIRCLE Address: Address: City-St-Zip: City-St-Zip: CORAL SPRINGS, FL 33076 Title: () Delete Title: SEC () Change (X) Addition

Title: () Delete Title: SEC () Change (X) Addition
Name: POSADAS, AIDA

Name: Name: POSADAS, AIDA
Address: Address: 3301 COLLEGE AVE.

City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33314

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIA G PEREZ PRES 11/11/2005