## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000114448

Entity Name: DECISION PAYROLL SERVICES. INC

25 SECOND STREET N., SUITE 200

ST. PETERSBURG, FL 33701

Address: City-St-Zip: FILED Jan 25, 2006 Secretary of State

Entity Nai	ME: DECISION PAYROLL SERVICES, IN	C.
Current Principal Place of Business:		New Principal Place of Business:
25 SECOND ST. NORTH, SUITE 200 ST. PETERSBURG, FL 33701		ONE PROGRESS PLAZA 500 ST. PETERSBURG, FL 33701
Current Mailing Address:		New Mailing Address:
	ND ST. NORTH, SUITE 200 RSBURG, FL 33701	ONE PROGRESS PLAZA 500 ST. PETERSBURG, FL 33701
FEI Number:	: 59-3695886 FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:
VANSON, PETER 25 2ND STREET N., SUITE 200 SAINT PETERSBURG, FL 33701 US		VANSON, PETER ONE PROGRESS PLAZA 500 SAINT PETERSBURG, FL 33701 US
The above in the State	named entity submits this statement for the of Florida.	e purpose of changing its registered office or registered agent, or both,
SIGNATURE:		01/25/2006
	Electronic Signature of Registered A	Agent Date
Election Car	mpaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	D/P ( ) Delete MILLS, WILLIAM H III 886 RAFAEL BLVD., NE ST. PETERSBURG, FL 33701	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D ( ) Delete VAN SON, PETER 25 SECOND ST. NORTH, SUITE 200 ST. PETERSBURG, FL 33701	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name:	CFO ( ) Delete NEWMAN, PETER B	Title: ( ) Change ( ) Addition Name:

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: PETER B NEWMAN CFO 01/25/2006