2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000055269

Entity Name: CO-ADVANTAGE PAYROLL TAX SERVICES, INC.

FILED Apr 14, 2006 Secretary of State

Current Principal Place of Business:			New Princip	New Principal Place of Business:		
111 W JEFFERSON STREET SUITE 100 ORLANDO, FL 32801						
Current M	ailing Addres	s:	New Mailing	New Mailing Address:		
111 W JEFFERSON STREET SUITE 100 ORLANDO, FL 32801						
FEI Number:	59-3724124	FEI Number Applied For ()	FEI Number Not Applic	able ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and A	Name and Address of New Registered Agent:		
250 PARK	. GRAHAM AVENUE SOU PARK, FL 3278	TH, 5TH FLOOR 9 US	111 W JEFF SUITE 100	ROBBINSON, WILLIAM H JR 111 W JEFFERSON STREET SUITE 100 ORLANDO, FL 32801 US		
	named entity s of Florida.	ubmits this statement for the p	urpose of changing its	registered off	ice or registered agent, or both,	
SIGNATUR	RE: WILLIAM I	H ROBBINSON JR		04/14/2006		
		c Signature of Registered Age	nt		Date	
Election Can	npaign Financing	Trust Fund Contribution ().				
OFFICERS	S AND DIRECT	ORS:	ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	WILLIAMS, DAY	SON STREET, SUITE 100	Title: Name: Address: City-St-Zip:	()(Change()Addition	
Title: Name: Address: City-St-Zip:	LOWREY, MARI	SON STREET, SUITE 100	Title: Name: Address: City-St-Zip:	()(Change ()Addition	
Title: Name: Address: City-St-Zip:	GOIN, BRUCE	Delete SON STREET, SUITE 100 32801	Title: Name: Address: City-St-Zip:	()(Change ()Addition	
Title: Name: Address: City-St-Zip:	HEWITT, BEN	Delete SON STREET, SUITE 100 32801	Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address:	ROBBINSON, BI	Delete LL SON STREET, SUITE 100	Name:	ROBBINSON, WI	Change ()Addition LLIAM H JR ON STREET, SUITE 100	

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.

City-St-Zip:

ORLANDO, FL 32801

SIGNATURE: WILLIAM H ROBBINSON JR S 04/14/2006

City-St-Zip:

ORLANDO, FL 32801