

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000027543

Entity Name: PEO MANAGEMENT GROUP, INC.

FILED
Feb 11, 2008
Secretary of State

Current Principal Place of Business:

4224 W. HENDERSON BLVD.
TAMPA, FL 336295611 US

New Principal Place of Business:

Current Mailing Address:

4224 W. HENDERSON BLVD.
ATTN: LEGAL DEPT.
TAMPA, FL 336295611 US

New Mailing Address:

4224 W. HENDERSON BLVD.
TAMPA, FL 336295611 US

FEI Number: 51-0450730

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIPS, JANE
4224 W. HENDERSON BLVD.
TAMPA, FL 336295611 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: HARDIN, HENRY C III
Address: 2435 TECH CENTER PKWY
City-St-Zip: LAWRENCEVILLE, GA 30043 US

Title: S () Delete
Name: PHILLIPS, JANE
Address: 4224 W. HENDERSON BLVD.
City-St-Zip: TAMPA, FL 336295611 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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.

SIGNATURE: JANE PHILLIPS

SEC

02/11/2008

Electronic Signature of Signing Officer or Director

_____ Date