2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2007
Secretary of State

DOCUMENT# P03000140215

Entity Name: THE WORK GROUP LIMITED, INC.

Current Principal Place of Business:

8213 MILL CREEK LANE
HUDSON, FL 34667

New Principal Place of Business:

Current Mailing Address:

8213 MILL CREEK LANE
HUDSON, FL 34667

New Mailing Address:

FEI Number: 20-0450487 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMASON, CHARLENE
8213 MILL CREEK LANE
HUDSON, FL 34667 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: PSTD ( ) Delete
Name: THOMASON, CHARLENE
Address: 8213 MILL CREEK LANE
City-St-Zip: HUDSON, FL 34667

Title: VPD ( ) Delete
Name: HANSFORD, JOHN C
Address: 8213 MILL CREEK LANE
City-St-Zip: HUDSON, FL 34667

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D ( ) Change (X) Addition
Name: STONE, JAMES
Address: 8215 MILL CREEK LANE
City-St-Zip: HUDSON, FL 34667

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.

SIGNATURE: CHARLENE THOMASON PSTD 03/21/2007

Electronic Signature of Signing Officer or Director — Date