

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000149347

FILED
Apr 22, 2008
Secretary of State

Entity Name: ESP MANAGEMENT SERVICES AGENCY, INC.

Current Principal Place of Business:

% BENEFITS RESOURCE GROUP
6480 ROCKSIDE WOODS BLVD. S SUITE 210
INDEPENDENCE, OH 441312230

New Principal Place of Business:

Current Mailing Address:

% BENEFITS RESOURCE GROUP
6480 ROCKSIDE WOODS BLVD. S SUITE 210
INDEPENDENCE, OH 441312230

New Mailing Address:

FEI Number: 11-3709217 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R & A AGENTS, INC.
% WILLIAM R. O'NEILL, ESQ.
850 PARK SHORE DRIVE THIRD FLOOR
NAPLES, FL 341033587 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: CEO () Delete
Name: FARRO, CHARLES J
Address: 970 CAPE MARCO DR # 1006
City-St-Zip: MARCO ISLAND, FL 34145

Title: PRES () Delete
Name: CREA, JOSEPH R
Address: 2609 HIDDEN CANYON
City-St-Zip: BRECKSVILLE, OH 44141

Title: VP () Delete
Name: HINKLE, MARK J
Address: 205 KENROY DRIVE
City-St-Zip: WADSWORTH, OH 44281

Title: VP (X) Delete
Name: HIRSCH, BRIAN R
Address: 11164 MALVERN DR
City-St-Zip: NORTH ROYALTON, OH 44133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: WILLIAM R. O'NEILL, ESQ.

RA

04/22/2008

Electronic Signature of Signing Officer or Director

_____ Date