

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90296 042 ***150.00

DOCUMENT # P03000155183

1. Entity Name
A + PAYROLL SERVICES, INC.



Principal Place of Business
7600 BRYAN DAIRY RD. N.
SUITE B
LARGO, FL 33777 US

Mailing Address
4430 ORCHID BLVD.
SUITE 101
CAPE CORAL, FL 33990 US

2. Principal Place of Business
13770 58th Street N.
Suite, Apt. #, etc.
Suite 304

3. Mailing Address
13770 58th Street N.
Suite, Apt. #, etc.
Suite 304



04202005 Chg-P CR2E034 (10/03)

City & State
Clearwater, FL
Zip
33760
Country
USA

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Clearwater, FL
Zip
33760
Country
USA

4. FEI Number
20-0513715

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MACY, STEPHEN A
7600 BRYAN DAIRY RD. N.
SUITE B
LARGO, FL 33777

> address
chg only

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

13770 58th Street N.

Suite 304

City Clearwater

FL

Zip Code
33760

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
P
MACY, STEPHEN A
STREET ADDRESS
7600 BRYAN DAIRY RD. N., SUITE B
CITY-ST-ZIP
LARGO, FL 33777 ☐ Delete

TITLE
NAME
VP
SMITH, TAMARA
STREET ADDRESS
7600 BRYAN DAIRY RD. N., STE. B
CITY-ST-ZIP
SEMINOLE, FL 33777 ☐ Delete

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
13770 58th Street N., Suite 304
Clearwater, FL 33760 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
13770 58th Street N., Suite 304
Clearwater, FL 33760 ☒ Change ☐ Addition

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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NAME

STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Tamara T. Smith Tamara T. Smith 4/20/05 727-544-8875
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #