2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# P06000095130

Entity Name: PUBLIC EMPLOYEES SERVICE COMPANY

Current Principal Place of Business:

1220 EAST PARK AVENUE
TALLAHASSEE, FL 32301

New Principal Place of Business:

2930 CAPITAL MEDICAL BLVD.
TALLAHASSEE, FL 32308

Current Mailing Address:

1220 EAST PARK AVENUE
TALLAHASSEE, FL 32301

New Mailing Address:

2930 CAPITAL MEDICAL BLVD.
TALLAHASSEE, FL 32308

FEI Number: 20-5231683 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GEIGER, JAMES W
1220 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

GEIGER, JAMES W
2930 CAPITAL MEDICAL BLVD.
TALLAHASSEE, FL 32308 US

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: 04/27/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GEIGER, JAMES W
Address: 1220 EAST PARK AVENUE
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: GEIGER, JAMES W
Address: 2930 CAPITAL MEDICAL BLVD.
City-St-Zip: TALLAHASSEE, FL 32308

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: JAMES W. GEIGER D 04/27/2009
Electronic Signature of Signing Officer or Director — Date