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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P09529 1. Corporation Name

ADP CREDIT CORP.

ONE ADP BOULEVARD	ness						BIO HAN BARN DI		(141) BIBII 166)
		Principal Place of Business Mailing Address							
	ONE ADP BOULEVARD ROSELAND NJ 07068-8728		ONE ADP BOULEVARD MS433 ROSELAND NJ 07068-8728		DO NOT WR	ITE IN THIS	SPACE		
US US						3. Date Incorporated or Qualifed 03/25/1986			
Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For			`
21		26				22-2497486			ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired			Additional equired
City & State		City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip 24	Country 25	Zip 29	Cou	ntry	<u></u>	This corporation owes the cur Personal Property Tax.	rent year Int	angible Yes	□No
	ame and Address of Curren	t Registered Agent				10. Name and Address of New	Registered	Agent	
				81 N	lame				
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				82 S	Street Addre	ddress (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324				83					
				84 0	City		·	85 Zip	Code
					•	pration submits this statement for the	<u> </u>	. `	
office or registered agent. I am familia	d agent, or both, in the State ar with, and accept the obliga typed or printed name of registered ager	of Florida. Such change was tions of, Section 607.0505, F	autnorized Iorida Stati	i by the utes.	corporatio	n's board of directors. I hereby acce when reinstating)	pt the appoi	ntment as re	egistered
12.	OFFICERS AN								
TITLE PSD		D DIRECTORS	13.	-		ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTO	DRS IN 12
		DELETE	13. 1.1 π	TLE			FICERS AN	ID DIRECTO	DRS IN 12
	ON, JAMES B						FICERS AN		
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NAME BENSONE A			1.1 TC 1.2 NA 1.3 ST	ME REET ADI TY-ST-ZI			FICERS AN		
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NAME BENSONS ONE A CITY-ST-ZIP ROSE TITLE VPD NAME HAVIL	adp Boulevard Land NJ	☐ DELETE	1.1 TT 1.2 NA 1.3 ST 1.4 CF 2.1 TT 2.2 NA	AME TREET ADI TY-ST-ZI TLE	P		FICERS AN	☐ Change	☐ Addition
NAME BENSON ONE A CITY-ST-ZIP ROSE TITLE VPD NAME HAVIL STREET ADDRESS ONE A	adp Boulevard Land NJ And, Richard J	☐ DELETE	1.1 TT 1.2 NV 1.3 ST 1.4 CI 2.1 TT 2.2 NV 2.3 ST 2.4 C	TREET ADI TY-ST-ZII TLE AME TREET ADI	P DRESS		FICERS AN	☐ Change	Addition
NAME BENSON ONE A CITY-ST-ZIP ROSE TITLE VPD NAME HAVIL STREET ADDRESS ONE A	ADP BOULEVARD LAND NJ AND, RICHARD J ADP BLVD.	☐ DELETE	1.1 TT 1.2 NV 1.3 ST 1.4 CG 2.1 TT 2.2 NV	TREET ADI TY-ST-ZII TLE AME TREET ADI	P DRESS	ADDITIONS/CHANGES TO OF	FICERS AN	☐ Change	☐ Addition
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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

OF SIGHING OFFICER OR DIRECTOR

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90162 048 ***150.00