

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000000472

FILED  
Jan 09, 2012  
Secretary of State

Entity Name: DIRECT PEO SOLUTIONS, INC.

**Current Principal Place of Business:**

535 PARK ST  
JACKSONVILLE, FL 32204 US

**New Principal Place of Business:**

530 PARK ST  
JACKSONVILLE, FL 32204 US

**Current Mailing Address:**

535 PARK ST  
JACKSONVILLE, FL 32204 US

**New Mailing Address:**

530 PARK ST  
JACKSONVILLE, FL 32204 US

FEI Number: 27-4014767

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPADAFORA, JEFFREY  
530 PARK ST  
JACKSONVILLE, FL 32204 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PETRO, MARK  
Address: 9016 PHILIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: VP  
Name: SPADAFORA, XIOMARA  
Address: 9016 PHILIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: CDST  
Name: SPADAFORA, JEFFREY L  
Address: 320 N. LOMBARDY LOOP  
City-St-Zip: JACKSONVILLE, FL 32259

Title: D  
Name: HULL, RONALD K  
Address: 550 CONWAY VILLAGE DR  
City-St-Zip: ST LOUIS, MO 63141

I hereby 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 all other like empowered.

SIGNATURE: JEFFREY L SPADAFORA

CEO

01/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date