

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000001702

**FILED**  
**Mar 17, 2011**  
**Secretary of State**

**Entity Name:** PROFESSIONAL EMPLOYER PLANS, INC.

**Current Principal Place of Business:**

600 N WESTSHORE BLVD  
SUITE 800  
TAMPA, FL 33609 US

**New Principal Place of Business:**

**Current Mailing Address:**

600 N WESTSHORE BLVD  
SUITE 800  
TAMPA, FL 33609 US

**New Mailing Address:**

**FEI Number:** 65-0727474

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOLCOMB, VICTOR W  
415 S HYDE PARK AVE  
TAMPA, FL 33606 US

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

HOLCOMB, VICTOR W  
3203 W CYPRESS ST  
TAMPA, FL 33607 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:

03/17/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: HARPER, WILLIAM H  
Address: 2930 JOHN MOORE RD  
City-St-Zip: BRANDON, FL 33511 US

Title: D/P  
Name: HARPER, STEVEN D  
Address: 4311 ROBIN LN  
City-St-Zip: TAMPA, FL 33609 US

Title: DVP  
Name: LIESS, ROBERT  
Address: 2602 W SAM ALLEN RD  
City-St-Zip: PLANT CITY, FL 33564 US

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: STEVEN HARPER

P

03/17/2011

Electronic Signature of Signing Officer or Director

Date