

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000065941

FILED
Mar 31, 2009
Secretary of State

Entity Name: NATIONAL EMPLOYEE LEASING AGENTS, INC.

Current Principal Place of Business:

115 W. OLYMPIA AVE.
STE. 111
PUNTA GORDA, FL 33950

New Principal Place of Business:

115 W. OLYMPIA AVE.
PUNTA GORDA, FL 33950

Current Mailing Address:

115 W. OLYMPIA AVE.
STE. 111
PUNTA GORDA, FL 33950

New Mailing Address:

115 W. OLYMPIA AVE.
PUNTA GORDA, FL 33950

FEI Number: 65-0912578

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMES, ROBERT
8512 ALAN BLVD
PUNTA GORDA, FL 33982 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: GOMES, ROBERT
Address: 8512 ALAN BLVD
City-St-Zip: PUNTA GORDA, FL 33982

Title: TD () Delete
Name: GOMES, TAMRA
Address: 8512 ALAN BLVD
City-St-Zip: PUNTA GORDA, FL 33982

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT L GOMES

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03/31/2009

Electronic Signature of Signing Officer or Director

Date