## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000037304

Entity Name: THE PROFESSIONAL EMPLOYEE, INC.

FILED Apr 21, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2323 DEL PRADO BLVD SUITE 7, PMB 361 CAPE CORAL, FL 33990

**New Mailing Address: Current Mailing Address:** 

PODRAWER 60205 C/O JOHN M. WICKER, P.A. PODRAWER 60205 FT MYERS, FL 33906 FORT MYERS, FL 33906

FEI Number: 65-0921066 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WICKER, JOHN M P.A. WICKER, JOHN M 12670 NEW BRITTANY BLVD., STE 101

12670 NEW BRITTANY BLVD., STE 101 FORT MYERS, FL 33907 FORT MYERS, FL 33907

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: JOHN M. WICKER 04/21/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition CLARK, DINA D CLARK, DINA D Name: Name: 1904 SE 20TH LN 1904 SE 20TH LANE Address: Address: City-St-Zip: CAPE CORAL, FL 33990 City-St-Zip: CAPE CORAL, FL 33990

( ) Delete Title: SVP Title: **VPST** (X) Change ( ) Addition

CLARK, LESTER JR Name: Name: CLARK, LESTER JR 1904 SE 20TH LN Address: 1904 SE 20TH LANE Address: CAPE CORAL, FL 33990 CAPE CORAL, FL 33990 City-St-Zip: 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: DINA D. CLARK DP 04/21/2009