## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S20910

FILED Mar 24, 2004 Secretary of State

| Entity Name: NATIONAL EMPLOYER SERVICES I, INC.   |   |                                 |   |  |                                   |  |
|---|---|---------------------------------|---|--|-----------------------------------|--|
| Current Pri   | incipal Place o   | of Business:                    | New Princi                                  | New Principal Place of Business:                                       |                                   |  |
| 118 S LAKE<br>AVON PAR  | EAVE<br>K, FL 33825   |                                 |   |  |                                   |  |
| Current Ma  | iling Address   | :                               | New Mailir                                  | New Mailing Address:   |                                   |  |
| 118 S LAKE<br>AVON PAR  | EAVE<br>K, FL 33825   |                                 |   |  |                                   |  |
| FEI Number:   | 59-3039504  | FEI Number Applied For ( )      | FEI Number Not Appli                        | cable ( )  | Certificate of Status Desired (X) |  |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: |   |                                 |   |  |                                   |  |
| DISTEFANO, GLEN J<br>118 SOUTH LAKE AVE.<br>AVON PARK, FL 33825 US                      |   |                                 | 118 SOUTH                                   | WELBORN, CHARLES P JR<br>118 SOUTH LAKE AVE.<br>AVON PARK, FL 33825 US |                                   |  |
| The above in the State  |   | bmits this statement for the pu | rpose of changing it                        | s registered of  | ice or registered agent, or both, |  |
| SIGNATUR  | E: CHARLES  | P WELBORN JR                    |   |  | 03/24/2004                        |  |
|   | Electronic  | Signature of Registered Agen    | t   |  | Date                              |  |
| Election Cam  | paign Financing 1   | Trust Fund Contribution ( ).    |   |  |                                   |  |
| OFFICERS AND DIRECTORS:   |   |                                 | ADDITION                                    | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:                           |                                   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | PD () D<br>WELBORN, CHAF<br>118 S LAKE AVE<br>AVON PARK, FL |                                 | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( )(   | Change ( ) Addition               |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | S () D<br>DISTEFANO, GLE<br>118 S LAKE AVE<br>AVON PARK, FL |                                 | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) (  | Change ( ) Addition               |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | D () D<br>WELBORN, SUSA<br>118 S LAKE AVE<br>AVON PARK, FL  | AN                              | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( )(   | Change()Addition                  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | () D  | velete                          | Title:<br>Name:<br>Address:<br>City-St-Zip: | D ()(<br>RIORDAN, ALISO<br>118 SOUTH LAK<br>AVON PARK, FL              | E AVE                             |  |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GLEN J DISTEFANO S 03/24/2004