

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000005175

Entity Name: ADP DEALER SERVICES, INC.**Current Principal Place of Business:**ONE ADP BOULEVARD
ROSELAND, NJ 07068**Current Mailing Address:**ONE ADP BOULEVARD
ROSELAND, NJ 07068**FEI Number:** 91-1674947**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PSD
Name	GLADISH, KENNETH J
Address	1950 HASSELL RD
City-State-Zip:	HOFFMAN ESTATES IL 60169

Title	ASD
Name	WECHSLER, BRUCE C
Address	ONE ADP BOULEVARD
City-State-Zip:	ROSELAND NJ 07068

Title	VT
Name	EBERHARD, MICHAEL C
Address	ONE ADP BOULEVARD
City-State-Zip:	ROSELAND NJ 07068

Title	AS
Name	GIBBONS, CHARLES
Address	ONE ADP BOULEVARD
City-State-Zip:	ROSELAND NJ 07068

Title	VP
Name	SIEGMUND, JAN
Address	ONE ADP BOULEVARD MS433
City-State-Zip:	ROSELAND NJ 07068

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: BRUCE WECHSLER**ASST. SECRETARY****04/28/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date