

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P34159

**Entity Name:** A D PROCESSING, INC.

**Current Principal Place of Business:**

ONE ADP BLVD  
MS433  
ROSELAND, NJ 07068

**Current Mailing Address:**

ONE ADP BLVD  
MS 433  
ROSELAND, NJ 07068 US

**FEI Number:** 13-3036745

**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 BONARTI, MICHAEL P/S/D  
Address ONE ADP BLVD MS433  
City-State-Zip: ROSELAND NJ 07068

Title VPT  
Name EBERHARD, MICHAEL VPT  
Address ONE ADP BLVD MS433  
City-State-Zip: ROSELAND NJ 07068

Title AS  
Name WECHSLER, BRUCE  
Address ONE ADP BLVD MS433  
City-State-Zip: ROSELAND NJ 07068

Title VP/C/D  
Name SIEGMUND, JAN  
Address ONE ADP BLVD  
MS 433  
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

AS/D

04/27/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date