



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 000068997		2. Name of Corporation THE ASSOCIATES PAYROLL MANAGEMENT SERVICE COMPANY, INC.			
3. Street Address Principal Business Office 300 ST. PAUL PLACE			City BALTIMORE	State MD	Zip 21202
4. Business Phone No. (813)604-8114		5. State of Incorporation DELAWARE			
6. Brief Description of the Character of Business Conducted in Rhode Island PAYROLL MANAGEMENT SERVICES FOR ASSOCIATES EMPLOYEES					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name JAMES W. SCHNEIDER			Vice President Name LINDA S. DAVIS		
Street Address 300 ST. PAUL PLACE			Street Address 300 ST. PAUL PLACE		
City BALTIMORE	State MD	Zip 21202	City BALTIMORE	State MD	Zip 21202
Secretary Name LISA A. HOFFMAN			Treasurer Name GREGORY LECHNER		
Street Address 3800 CITIGROUP CENTER DRIVE, BLDG F-1			Street Address 300 ST. PAUL PLACE		
City TAMPA	State FL	Zip 33610	City BALTIMORE	State MD	Zip 21202
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name JAMES W. SCHNEIDER			Director Name GREGORY LECHNER		
Street Address 300 ST. PAUL PLACE			Street Address 300 ST. PAUL PLACE		
City BALTIMORE	State MD	Zip 21202	City BALTIMORE	State MD	Zip 21202
Director Name LINDA S. DAVIS			Director Name None		
Street Address 300 ST. PAUL PLACE			Street Address		
City BALTIMORE	State MD	Zip 21202	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION <u>MUST</u> BE COMPLETED		
			Number of Shares 10	Class/Series COMMON	Par Value 100.00

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED

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Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature

LISA A. HOFFMAN

Print or Type Name

ASST. SECRETARY

Title

Date

1-29-10

File Date

Check No.

By:

FOR SECRETARY OF STATE USE ONLY