



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

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Foreign Business Corporation
Annual Report

Filing Period: January 1 - March 1

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.

ANNUAL REPORT YEAR: 2015

1. Corporate ID No. 000068997

2. Name of Corporation The Associates Payroll Management Service Company, Inc.

3. Street Address Principal Business Office:

No. and Street: 300 ST. PAUL PLACE

City or Town: BALTIMORE

State: MD

Zip: 21202

Country: USA

4. Business Phone No.

8136048115

5. State of Incorporation

State: DE

6. Brief Description of the Character of Business Conducted in Rhode Island

A PAYROLL MANAGEMENT SERVICES FOR ASSOCIATES EMPLOYEES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JAMES W SCHNEIDER	300 ST PAUL PLACE BALTIMORE, MD 21202 USA
TREASURER	GREGORY LECHNER	300 ST PAUL PLACE BALTIMORE, MD 21202 USA
SECRETARY	LINDA DAVIS	300 ST PAUL PLACE BALTIMORE, MD 21202 USA
VICE PRESIDENT	JOHN OVALLES	3800 CITIGROUP CENTER DRIVE TAMPA, FL 33610 USA
ASSISTANT SECRETARY	LISA A HOFFMAN	3800 CITIGROUP CENTER DRIVE

		TAMPA, FL 33610 USA
DIRECTOR	JAMES SCHNEIDER	300 ST PAUL PLACE BALTIMORE, MD 21202 USA
DIRECTOR	DONNA S STONE	6400 LAS COLINAS BLVD IRVING, TX 75039 USA
DIRECTOR	LINDA DAVIS	300 ST PAUL PLACE BALTIMORE, MD 21202 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CWP		\$100.0000	10.00	10

9. 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.

Signed this 20 Day of February, 2015 at 10:00:59 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By LISA A. HOFFMAN
Signature of Authorized Representative of the Corporation

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

Form No. 630
Revised 09/07

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