



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 114027		2. Name of Corporation ADP TotalSource FL XVII, Inc.			
3. Street Address Principal Business Office 10200 Sunset Drive			City miami	State FL	Zip 33173
4. Business Phone No. 305.630.1000		5. State of Incorporation FLORIDA			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island PROFESSION EMPLOYER ORGANIZATION.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name CARLOS RODRIGUEZ			Vice President Name ASST. SEC. WILLIAM CUETO		
Street Address 10200 Sunset Drive			Street Address 10200 Sunset Drive		
City miami	State FL	Zip 33173	City miami	State FL	Zip 33173
Secretary Name ROBERT SINGER			Treasurer Name NONE		
Street Address ONE ADP BLDG			Street Address		
City ROSELAND	State NJ	Zip 07068	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name ROBERT SINGER			Director Name		
Street Address ONE ADP BLDG			Street Address		
City ROSELAND	State NJ	Zip 07068	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
50 COMM \$20.00 PAR VALUE			50	COMMON	\$20

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\*114027\*

**FILED**

File Date: MAR 21 2005  
Check No.: 148978  
By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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 of Officer: [Signature] Date: 1/17/2005

Print or Type Name of Officer: WILLIAM CUETO

Title of Officer: ASST. SECRETARY



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR** 2004

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(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 114027		2. Name of Corporation ADP TotalSource FL XVII, Inc.			
3. Street Address Principal Business Office 10200 Sunset Drive			City miami	State FL	Zip 33173
4. Business Phone No. 305.630.1000		5. State of Incorporation FLORIDA			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island PROFESSION EMPLOYER ORGANIZATION.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name CARLOS RODRIGUEZ			Vice President Name ASST. SECRETARY William Cuelto		
Street Address 10200 Sunset Drive			Street Address 10200 Sunset Drive		
City miami	State FL	Zip 33173	City miami	State FL	Zip 33173
Secretary Name Robert Singer			Treasurer Name Peter Stewart		
Street Address One ADP Blvd			Street Address 10200 Sunset Drive		
City Roseland	State NJ	Zip 07068	City miami	State FL	Zip 33173
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Robert Singer			Director Name		
Street Address One ADP Blvd			Street Address		
City Roseland	State NJ	Zip 07068	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
50 COMM \$20.00 PAR VALUE			50	Common	\$20

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 114027 \*

File Date 2.17.04  
Check No. 137241  
By: [Signature]  
FOR SECRETARY OF STATE USE ONLY

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] 1/26/2004  
Signature of Officer Date  
William Cuelto  
Print or Type Name of Officer  
Assistant Secretary  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR** 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00  
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 120806		2. Name of Corporation ADP TotalSource FL XI, Inc.			
3. Street Address Principal Business Office 10200 Sunset Drive			City MIAMI	State FL	Zip 33173
4. Business Phone No. 305-630-1000		5. State of Incorporation FLORIDA		6. SIC Code 7880	
7. Brief Description of the Character of Business Conducted in Rhode Island EMPLOYEE LEASING					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name CARLOS RODRIGUEZ			Vice President Name ASST. SECRETARY WILLIAM CUEDO		
Street Address 10200 Sunset Drive			Street Address 10200 Sunset Drive		
City MIAMI	State FL	Zip 33173	City MIAMI	State FL	Zip 33173
Secretary Name ROBERT SINGER			Treasurer Name PETER STEWART		
Street Address ONE ADP BLVD			Street Address 10200 Sunset Drive		
City ROSELAND	State NJ	Zip 07068	City MIAMI	State FL	Zip 33173
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name ROBERT SINGER			Director Name		
Street Address ONE ADP BLVD			Street Address		
City ROSELAND	State NJ	Zip 07068	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 COMM \$1.00 PAR VALUE			100	COMMON	\$1

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 2 0 8 0 6 \*

File Date 2-17-04  
Check No. 137040  
By: [Signature]  
FOR SECRETARY OF STATE USE ONLY

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 of Officer [Signature] Date 1/26/2005  
Print or Type Name of Officer William Cuedo  
Title of Officer Assistant Secretary



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **114027** 2. Name of Corporation **ADP TotalSource FL XVII, Inc.**  
3. Street Address Principal Business Office **10200 Sunset Drive** City **Miami** State **FL** Zip **33173**  
4. Business Phone No. **305-630-1000** 5. State of Incorporation **FLORIDA** 6. SIC Code **7880**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Professional Employer Organization**

**8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) X FILL IN SPACES BEFORE USING ATTACHMENTS**

<b>President Name</b> <b>Carlos Rodriguez</b>	<b>Vice President Name</b> <b>Robert Singer</b>
<b>Street Address</b> <b>10200 Sunset Drive</b>	<b>Street Address</b> <b>One ADP Blvd.</b>
<b>City</b> <b>Miami</b> <b>State</b> <b>FL</b> <b>Zip</b> <b>33173</b>	<b>City</b> <b>Roseland</b> <b>State</b> <b>NJ</b> <b>Zip</b> <b>07068</b>
<b>Secretary Name</b> <b>Robert Singer</b>	<b>Treasurer Name</b> <b>Sergio Fernandez</b>
<b>Street Address</b> <b>One ADP Blvd.</b>	<b>Street Address</b> <b>10200 Sunset Drive</b>
<b>City</b> <b>Roseland</b> <b>State</b> <b>NJ</b> <b>Zip</b> <b>07068</b>	<b>City</b> <b>Miami</b> <b>State</b> <b>FL</b> <b>Zip</b> <b>33173</b>

**9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

<b>Director Name</b> <b>Robert Singer.</b>	<b>Director Name</b>
<b>Street Address</b> <b>One ADP Blvd.</b>	<b>Street Address</b>
<b>City</b> <b>Roseland</b> <b>State</b> <b>NJ</b> <b>Zip</b> <b>07068</b>	<b>City</b> <b>State</b> <b>Zip</b>
<b>Director Name</b>	<b>Director Name</b>
<b>Street Address</b>	<b>Street Address</b>
<b>City</b> <b>State</b> <b>Zip</b>	<b>City</b> <b>State</b> <b>Zip</b>

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

**AUTHORIZED SHARES**

<b>Number of Shares</b>	<b>Class/Series</b>	<b>Par Value</b>
<b>50 COMM</b>	<b>\$20.00 PAR VALUE</b>	

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

**ISSUED SHARES**

<b>Number of Shares</b>	<b>Class/Series</b>	<b>Par Value</b>
<b>50 Common</b>		<b>\$20</b>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 1 4 0 2 7 \*

3-31-03

File Date: \_\_\_\_\_

Check No.: 114045

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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] 1/30/2003  
Signature of Officer Date

**William Cueto**

Print or Type Name of Officer

**Assistant Secretary**

Title of Officer

**OFFICERS OF ADP TOTALSOURCE GROUP, INC. AND ITS SUBSIDIARIES**

<b>NAME</b>	<b>ADDRESS</b>	<b>SOCIAL SECURITY.</b>	<b>TITLE</b>
Carlos A. Rodriguez	10200 SUNSET DRIVE MIAMI, FL 33173	264-85-9658	President & Chief Controlling Officer
Sergio Fernandez	10200 SUNSET DRIVE MIAMI, FL 33173	267-78-1438	Chief Financial Officer
Robert J. Singer	ONE ADP BOULEVARD ROSELAND, NJ 07068	156-32-2564	Vice President / Secretary & Director
William F. Cueto	10200 SUNSET DRIVE MIAMI, FL 33173	261-83-2565	Assistant Secretary



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **114027** 2. Name of Corporation **ADP TotalSource FL XVII, Inc.**

3. Street Address Principal Business Office **10200 Sunset Drive** City **Miami** State **Florida** Zip **33173**

4. Business Phone No. **305-630-1000** 5. State of Incorporation **FLORIDA** 6. SIC Code **7880**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Professional Employer Organization**

**8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) X FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name <b>Carlos Rodriguez</b> Street Address <b>10200 Sunset Drive</b> City <b>Miami</b> State <b>Florida</b> Zip <b>33173</b>	Vice President Name <b>Robert Singer</b> Street Address <b>One ADP Blvd.</b> City <b>Roseland</b> State <b>New Jersey</b> Zip <b>07068</b>
Secretary Name <b>Robert Singer</b> Street Address <b>One ADP Blvd.</b> City <b>Roseland</b> State <b>New Jersey</b> Zip <b>07068</b>	Treasurer Name <b>Sergio Fernanez</b> Street Address <b>10200 Sunset Drive</b> City <b>Miami</b> State <b>Florida</b> Zip <b>33173</b>

**9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name <b>Robert Singer</b> Street Address <b>One ADP Blvd.</b> City <b>Roseland</b> State <b>New Jersey</b> Zip <b>07068</b>	Director Name  Street Address  City State Zip
Director Name  Street Address  City State Zip	Director Name  Street Address  City State Zip

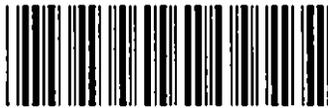
**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES	Class/Series	Par Value
<b>50 COMM \$20.00 PAR VALUE</b>		

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

ISSUED SHARES	Class/Series	Par Value
<b>0</b>		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 1 4 0 2 7 \*

File Date: 2-11-02

Check No.: 83782

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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] 2.6.02  
Signature of Officer Date

**William Cueto**  
Print or Type Name of Officer

**Assistant Secretary**  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **114027** 2. Name of Corporation **ADP TotalSource FL XVII, Inc.**

3. Street Address Principal Business Office **10200 Sunset Drive** City **miami** State **FL** Zip **33173**  
4. Business Phone No. **305-630-1000** 5. State of Incorporation **FLORIDA** 6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Professional Employer Organization**

**8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name <b>Carlos Rodriguez</b> Street Address <b>10200 Sunset Drive</b> City <b>miami</b> State <b>FL</b> Zip <b>33173</b>	Vice President Name <b>Robert Singer</b> Street Address <b>One ADP Blvd</b> City <b>Roseland</b> State <b>NJ</b> Zip <b>07068</b>
Secretary Name <b>Robert Singer</b> Street Address <b>One ADP Blvd</b> City <b>Roseland</b> State <b>NJ</b> Zip <b>07068</b>	Treasurer Name <b>Sergio Fernandez</b> Street Address <b>10200 Sunset Drive</b> City <b>miami</b> State <b>FL</b> Zip <b>33173</b>

**9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name <b>Robert Singer</b> Street Address <b>One ADP Blvd</b> City <b>Roseland</b> State <b>NJ</b> Zip <b>07068</b>	Director Name  Street Address  City State Zip
Director Name  Street Address  City State Zip	Director Name  Street Address  City State Zip

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**50 COMMON \$20.00 PAR VALUE**

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**50 COMMON 20.00**

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 1 4 0 2 7 \*

File Date: 5-18-01

Check No.: 50440

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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] 1-15-01  
Date

William Cueto  
Print or Type Name of Officer

Assistant Secretary  
Title of Officer

OFFICERS OF ADP TOTALSOURCE GROUP, INC. AND ITS SUBSIDIARIES

NAME	ADDRESS	SOCIAL SECURITY.	TITLE
Carlos A. Rodriguez	10200 SUNSET DRIVE MIAMI, FL 33173	264-85-9658	President & Chief Controlling Officer
Sergio Fernandez	10200 SUNSET DRIVE MIAMI, FL 33173	267-78-1438	Chief Financial Officer
Robert J. Singer	ONE ADP BOULEVARD ROSELAND, NJ 07068	156-32-2564	Vice President & Secretary
William F. Cueto	10200 SUNSET DRIVE MIAMI, FL 33173	261-83-2342	Assistant Secretary
Gregory Busko	5800 WINDWARD PKWY. ALPHARETTA, GA 30005	253-82-1451	Assistant Secretary