

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000054311

**Entity Name:** CERTIPAY PEO SOLUTIONS II, INC.**Current Principal Place of Business:**1801 HOBBS RD  
AUBURNDALE, FL 33823**Current Mailing Address:**1801 HOBBS RD  
AUBURNDALE, FL 33823 US**FEI Number:** 59-3194585**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KNIGHT, JAMES F  
1801 HOBBS RD  
AUBURNDALE, FL 33823 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	VP
Name	KNIGHT, JAMES F
Address	105 COVINGTON COVE
City-State-Zip:	WINTER HAVEN FL 33884

Title	T
Name	KNIGHT, JAMES F
Address	105 COVINGTON COVE
City-State-Zip:	WINTER HAVEN FL 33884

Title	VP, SEC
Name	RUGGIERI, MARK
Address	1 EAGLES NEST
City-State-Zip:	WINTER HAVEN FL 33881

Title	PD
Name	WILSON, DENNY A
Address	1801 HOBBS RD.
City-State-Zip:	AUBURNDALE FL 33823

Title	CFO
Name	KEITH, WILLIAM C
Address	1801 HOBBS RD
City-State-Zip:	AUBURNDALE FL 33823

*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:** WILLIAM C KEITH

CFO

04/29/2016

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