2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005
Secretary of State

DOCUMENT# 698957

Entity Name: TMG STAFFING SERVICES, INC.

Current Principal Place of Business:

PO BOX 8826
DOTHAN, AL 36304

New Principal Place of Business:

Current Mailing Address:

PO BOX 8826
DOTHAN, AL 36305

New Mailing Address:

FEI Number: 63-1251064 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCKIBBEN, ANDREW J III
2634 LAKEVIEW CIRCLE
ALFORD, FL 32420 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: C ( ) Delete
Name: THOSTESON, COLLEEN
Address: 6502 STATE HIGHWAY 134 EAST
City-St-Zip: COLUMBIA, AL 36319

Title: VP ( ) Delete
Name: GOODSON, JEFF
Address: 107 TELFORD PLACE
City-St-Zip: DOTHAN, AL 36305

Title: P ( ) Delete
Name: MCKIBBEN, ROSEMARY
Address: 110 HADDINGTON PARK
City-St-Zip: DOTHAN, AL 36305

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP ( ) Change (X) Addition
Name: KNOWLES, FRANK B
Address: 114 EMERALD LAKE TERRACE
City-St-Zip: DOTHAN, AL 36303

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROSEMARY G. MCKIBBEN P 04/21/2005

Electronic Signature of Signing Officer or Director — Date