2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 22, 2001 8:00 am **DOCUMENT # \$97055 Secretary of State** 1. Entity Name ALL ABOUT STAFFING, INC. 03-22-2001 90072 050 ***150.00 Principal Place of Business Mailing Address ONE PARK PLAZA PO BOX 750 NASHVILLE TN 37203 NASHVILLE TN 37202 UUU28351 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FELNumber 65-0298515 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. \mathcal{D} V D Addition ☐ Change TITLE Delete TITLE R. Milton Johnson HINTON, JAMES D NAME NAME ONE Park Plaza STREET ADDRESS STREET ADDRESS ONE PARK PLAZA Nashuill IN 37203 CITY-ST-2IP CITY-ST-7IP NASHVILLE TN X Addition ☐ Change TITLE Delete TITLE David Denson BLACKWOOD, DORA NAME NAME ONE Park Plaza STREET ADDRESS STREET ADDRESS ONE PARK PLAZA CITY-ST-ZIP Mashville TN CITY-ST-ZIP NASHVILLE IN DVP ☐ Detete TITLE Change ■ Addition TITLE NAME MOORE, A. BRUCE NAME STREET ADDRESS ONE PARK PLAZA STREET ADDRESS CITY-ST-ZIP NASHVILLE TN CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME GORMLEY, TOM C NAME STREET ADDRESS STREET ADDRESS ONE PARK PLAZA CITY-ST-ZIP CITY-ST-ZIP NASHVILLE TN DVPS TITLE Delete ☐ Change Addition TITLE NAME FRANCK, JOHN M. NAME STREET ADDRESS STREET ADDRESS ONE PARK PLAZA CITY-ST-ZIP CITY-ST-ZIP NASHVILLE TN TITLE ☐ Delete TITLE ☐ Change Addition NAME GRUBBS, RONALD L NAME ONE PARK PLAZA STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered **David Denson** Assistant Secretary

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

SIGNATURE:

NASHVILLE TN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR