

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000015898

Entity Name: CERTITEMP, INC.**Current Principal Place of Business:**1801 HOBBS RD.
AUBURNDALE, FL 33823**Current Mailing Address:**1801 HOBBS RD.
AUBURNDALE, FL 33823 US**FEI Number:** 20-2257000**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KEITH, WILLIAM C
1517 COMMERCIAL PARK DR.
LAKELAND, FL 33801 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	P
Name	RUGGIERI, MARK J
Address	1 EAGLES NEST
City-State-Zip:	WINTER HAVEN FL 33880

Title	VP
Name	WILSON, DENNY
Address	6645 WILLOWS WAY
City-State-Zip:	CUMMING GA 30040

Title	T
Name	KNIGHT, JAMES F
Address	1801 HOBBS ROAD
City-State-Zip:	AUBURNDALE FL 33823

Title	S
Name	MCGUIRE, NATHAN E
Address	1801 HOBBS ROAD
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 KEITH

CFO

04/28/2014

Electronic Signature of Signing Officer/Director Detail_____
Date