

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000125422

Entity Name: CURAMED STAFFING, LLC

Current Principal Place of Business:

7143 STATE 54, #235
NEW PORT RICHEY, FL 34653

Current Mailing Address:

7143 STATE 54, #235
NEW PORT RICHEY, FL 34653 US

FEI Number: 26-1599791

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SUTTON, SHANNON
7143 STATE 54, #235
NEW PORT RICHEY, FL 34653 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

Authorized Person(s) Detail :

Title MGR
Name SUTTON, SHANNON
Address 7143 STATE 54, #235
City-State-Zip: NEW PORT RICHEY FL 34653

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHANNON SUTTON

DIRECTOR

04/29/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date