

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002225

Entity Name: ADECCO MEDICAL & SCIENCE STAFFING, INC.

FILED
Apr 15, 2014
Secretary of State
CC7118366601

Current Principal Place of Business:

10151 DEERWOOD PARK BLVD.
BLDG 200 STE 400
JACKSONVILLE, FL 32256

Current Mailing Address:

10151 DEERWOOD PARK BLVD.
BLDG 200 STE 400
JACKSONVILLE, FL 32256 US

FEI Number: 16-1268904

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DP
Name CROUCH, ROBERT P
Address 10151 DEERWOOD PARK BLVD.
BLDG 200 STE 400
City-State-Zip: JACKSONVILLE FL 32256

Title DCFO
Name KING, J. TODD
Address 10151 DEERWOOD PARK BLVD.
BLDG. 200 STE 400
City-State-Zip: JACKSONVILLE FL 32256

Title VP-TAX
Name HOWELL, DIANE S
Address 175 BROAD HOLLOW ROAD
City-State-Zip: MELVILLE NY 11747

Title SVPS
Name HOLLAND, GREGORY D
Address 10151 DEERWOOD PARK BLVD,
BLDG. 200, SUIT.
City-State-Zip: JACKSONVILLE FL 32256

Title VPAS
Name KARABELAS, DIANA R
Address 175 BROAD HOLLOW RD.
City-State-Zip: MELVILLE NY 11747

Title SVPT
Name DE PALO, LORELEI
Address 175 BROAD HOLLOW ROAD
City-State-Zip: MELVILLE NY 11747

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: DIANE HOWELL

VP-TAX

04/15/2014

Electronic Signature of Signing Officer/Director Detail

Date