

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000003112

**Entity Name:** ACCOUNTABLE HEALTHCARE STAFFING, INC.

**FILED**  
**Jan 07, 2014**  
**Secretary of State**  
**CC0576611302**

**Current Principal Place of Business:**

999 YAMATO ROAD  
SUITE 210  
BOCA RATON, FL 33431

**Current Mailing Address:**

999 YAMATO ROAD  
SUITE 210  
BOCA RATON, FL 33431 US

**FEI Number: 45-2469689**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
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:** NRAI

01/07/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN, CEO  
Name ADAMSON, ROBERT J  
Address 999 YAMATO ROAD  
SUITE 210  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR  
Name ALBERT, EDWARD Y JR.  
Address 999 YAMATO ROAD  
SUITE 210  
City-State-Zip: BOCA RATON FL 33431

Title PRESIDENT, TREASURER  
Name LITTLE, KEVIN  
Address 999 YAMATO ROAD  
SUITE 210  
City-State-Zip: BOCA RATON FL 33431

Title SECRETARY  
Name GOLDWYN, ANDREW S  
Address 999 YAMATO ROAD  
SUITE 210  
City-State-Zip: BOCA RATON FL 33431

Title CFO  
Name YESNER, JEFF  
Address 999 YAMATO ROAD  
SUITE 210  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR  
Name HOLLIS, C. DARYL  
Address 999 YAMATO ROAD  
SUITE 210  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR  
Name FODALE, PATRICK  
Address 999 YAMATO ROAD  
SUITE 210  
City-State-Zip: BOCA RATON FL 33431

*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:** ANDREW S. GOLDWYN

**SECRETARY**

01/07/2014

Electronic Signature of Signing Officer/Director Detail

Date