


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90464 009 ***150.00

DOCUMENT # F0100000334					
1. Entity Name MILESTONE STAFFING SERVICES, INC.					
Principal Place of Business 333 NORTH SUMMIT STREET TOLEDO, OH 43604			Mailing Address 333 NORTH SUMMIT STREET TOLEDO, OH 43604		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 74-2963093	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL		Zip Code
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	CD <input type="checkbox"/> Delete	TITLE	V.P./Director of Tax <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	ORMOND, PAUL A	NAME	Kathryn S. Hoops		
STREET ADDRESS	333 NORTH SUMMIT STREET	STREET ADDRESS	333 N. Summit St.		
CITY-ST-ZIP	TOLEDO, OH 43604	CITY-ST-ZIP	Toledo, OH 43604		
TITLE	P <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ALLEN, CHARLES L	NAME			
STREET ADDRESS	333 NORTH SUMMIT STREET	STREET ADDRESS			
CITY-ST-ZIP	TOLEDO, OH 43604	CITY-ST-ZIP			
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WEIKEL, M. KEITH	NAME			
STREET ADDRESS	333 NORTH SUMMIT STREET	STREET ADDRESS			
CITY-ST-ZIP	TOLEDO, OH 43604	CITY-ST-ZIP			
TITLE	VAS <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MEYERS, GEOFFREY G	NAME			
STREET ADDRESS	333 NORTH SUMMIT STREET	STREET ADDRESS			
CITY-ST-ZIP	TOLEDO, OH 43604	CITY-ST-ZIP			
TITLE	VS <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BIXLER, R. JEFFREY	NAME			
STREET ADDRESS	333 NORTH SUMMIT STREET	STREET ADDRESS			
CITY-ST-ZIP	TOLEDO, OH 43604	CITY-ST-ZIP			
TITLE	VAS <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	CAVANAUGH, STEVEN M	NAME			
STREET ADDRESS	333 NORTH SUMMIT STREET	STREET ADDRESS			
CITY-ST-ZIP	TOLEDO, OH 43604	CITY-ST-ZIP			
12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>[Signature]</i>			04-25-05 (419) 252-5794		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #

ATTACHMENT

40072611

MILESTONE STAFFING SERVICES, INC.

#F01000000334

OFFICERS

Paul A. Ormond	President & Chief Executive Officer
M. Keith Weikel	Sr. Exec. Vice President
Geoffrey G. Meyers	Executive Vice President, Chief Financial Officer, Treasurer & Assistant Secretary
R. Jeffrey Bixler	Vice President, General Counsel & Secretary
Steven M. Cavanaugh	Vice President, Director of Corporate Development & Assistant Secretary
Nancy A. Edwards	Vice President, General Manager, Central Division
Larry R. Godla	Vice President, Development & Construction
John K. Graham	Vice President, General Manager, Eastern Division
Jeffrey A. Grillo	Vice President, General Manager, Mid-Atlantic Div.
Kathryn S. Hoops	Vice President, Director of Tax & Assistant Treasurer
Roger T. Jenkins	Vice President/General Manager
William H. Kinschner	Vice President, Director of Management Support Services
David B. Lanning	Vice President, Development
Barry A. Lazarus	Vice President, Director of Reimbursement
Larry C. Lester	Vice President of Marketing, General Manager, Midwest Division
Spencer C. Moler	Vice President, Controller & Assistant Secretary
James P. Pagoaga	Vice President, Rehabilitation Services
Richard W. Parades	Vice President, General Manager, Mid-States Div.
John I. Remenar	Vice President, Director of Financial Services & Assistant Treasurer
F. Joseph Schmitt	Vice President, General Manager, Southern Division
Steven D. Spencer	Vice President, Director of Human Resources & Assistant Secretary
Jo Ann Young	Vice President, General Manger of Assisted Living
Martin D. Allen	Assistant Vice President, Director of Internal Audit and Risk Management
Matthew S. Kang	Assistant Treasurer
Thomas R. Kile	Assistant Treasurer
David K. Nees	Associate General Counsel & Assistant Secretary

DIRECTORS

R. Jeffrey Bixler

ADDRESS FOR ALL ABOVE IS:

333 N. Summit St.
Toledo, Ohio 43604
Phone: (419) 252-5500