

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000000394

FILED
Apr 19, 2002 8:00 AM
Secretary of State

Entity Name: MED-STAFF, INC.

Current Principal Place of Business:

297 S. NEWTOWN STREET ROAD
NEWTON SQUARE, PA 19073

New Principal Place of Business:

Current Mailing Address:

297 S. NEWTOWN STREET ROAD
NEWTON SQUARE, PA 19073

New Mailing Address:

FEI Number: 23-2491296

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AZNAVORIAN, VASKEN Z
2701 W. OAKLAND PARK BLVD., #225
FORT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DAVIS, WILLIAM
Address: 4 ARONWALD LANE
City-St-Zip: NEWTON SQUARE, PA

Title: T () Delete
Name: RODDEN, TIMOTHY
Address: 18 CASTLE ROCK DRIVE
City-St-Zip: HAVERTOWN, PA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DAVIS, WILLIAM
Address: 4 ARONWALD LANE
City-St-Zip: NEWTON SQUARE, PA 19073 US

Title: T (X) Change () Addition
Name: RODDEN, TIMOTHY
Address: 18 CASTLE ROCK DRIVE
City-St-Zip: HAVERTOWN, PA 19083 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: TIMOTHY RODDEN

TREA

04/19/2002

Electronic Signature of Signing Officer or Director

Date