

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005706

Entity Name: CLUB STAFFING, INC.

FILED  
Apr 22, 2005  
Secretary of State

## Current Principal Place of Business:

4800 N. FEDERAL HWY  
STE E-301  
BOCA RATON, FL 334313428 US

## New Principal Place of Business:

## Current Mailing Address:

4800 N. FEDERAL HWY  
STE E-301  
BOCA RATON, FL 334313428 US

## New Mailing Address:

FEI Number: 58-2655851

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KRASKA, LAWRENCE P  
4800 N. FEDERAL HWY  
STE E-301  
BOCA RATON, FL 334313428 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D/V ( ) Delete  
Name: CARDENAS, L. DAVID  
Address: METRO CENTER, 1 STATION PLACE  
City-St-Zip: STAMFORD, CT 069026800 US

Title: D/V ( ) Delete  
Name: QUINN, JAMES J  
Address: METRO CENTER, 1 STATION PLACE  
City-St-Zip: STAMFORD, CT 069026800 US

Title: D ( ) Delete  
Name: CONROY, JAMES A  
Address: METRO CENTER, 1 STATION PLACE  
City-St-Zip: STAMFORD, CT 069026800 US

Title: D ( ) Delete  
Name: BENJAMIN, GERALD R  
Address: 3414 PEACHTREE RD NE, SUITE 238-MONARCH P  
City-St-Zip: ATLANTA, GA 303261153 US

Title: D ( ) Delete  
Name: MORRIS, ROBERT S  
Address: METRO CENTER, 1 STATION PLACE  
City-St-Zip: STAMFORD, CT 069026800 US

Title: D ( ) Delete  
Name: KRASKA, LAWRENCE P  
Address: 4800 N. FEDERAL HWY, STE E-301  
City-St-Zip: BOCA RATON, FL 334313428 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: LAWRENCE KRASKA

D

04/22/2005

Electronic Signature of Signing Officer or Director

Date