2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002166

Entity Name: ASSIGNMENT AMERICA, INC.

FILED Jan 09, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
6551 PARK OF COMMERCE BLVD., N.W. BOCA RATON, FL 33487					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
6551 PARK OF COMMERCE BLVD., N.W. ATTN: STEPHANIE PAPOULIS BOCA RATON, FL 33487					
FEI Number: (65-1113081	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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:					
Election Cam		c Signature of Registered Agent Trust Fund Contribution ().		Date	
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	P () MULLARKEY, S' 40 EASTERN AV MALDEN, MA 0:	'ENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LEWIS, DANIEL	Delete COMMERCE BLVD., N.W. FL 33487	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () RUBIN, STEPHE 1585 BROADWA NEW YORK, NY	AY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BALL, SUSAN	Delete COMMERCE BLVD., N.W. FL 33487	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	WARD, JONATH	COMMERCE BLVD., N.W.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KALAFA, VICTO	COMMERCE BLVD., N.W.	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SUSAN E. BALL AS 01/09/2009