

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003053

Entity Name: PHYSICIAN STAFFING, INC.

FILED
Jan 15, 2008
Secretary of State

Current Principal Place of Business:

30680 BAINBRIDGE ROAD
CLEVELAND, OH 44139

New Principal Place of Business:

481 21ST AVENUE SOUTH
NAPLES, FL 43102

Current Mailing Address:

30680 BAINBRIDGE ROAD
CLEVELAND, OH 44139

New Mailing Address:

FEI Number: 34-1157377 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, JOHN S
481 21ST AVE. S.
NAPLES, FL 34102 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: P () Delete
Name: MARTIN, JOHN S
Address: 481 21ST AVE. S.
City-St-Zip: NAPLES, FL 34102

Title: VCST () Delete
Name: MARTIN, DAVID
Address: 30680 BAINBRIDGE ROAD
City-St-Zip: CLEVELAND, OH 44139

Title: C (X) Delete
Name: MARTIN, JOHN S III
Address: 481 21ST AVE. S.
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MARTIN, JOHN S
Address: 481 21ST AVE. S.
City-St-Zip: NAPLES, FL 34102

Title: SEC (X) Change () Addition
Name: MARTIN, DAVID A
Address: 30680 BAINBRIDGE ROAD
City-St-Zip: CLEVELAND, OH 44139

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

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: JENNIFER HAYES

VP

01/15/2008

Electronic Signature of Signing Officer or Director

Date