

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003053

FILED  
Jan 05, 2009  
Secretary of State

Entity Name: PHYSICIAN STAFFING, INC.

## Current Principal Place of Business:

481 21ST AVENUE SOUTH  
NAPLES, FL 43102

## New Principal Place of Business:

481 21ST AVENUE SOUTH  
NAPLES, FL 34102

## 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:

MARTIN III, JOHN S  
481 21ST AVE. S.  
NAPLES, FL 34102      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: JOHN S. MARTIN, III

01/05/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

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

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: CFO ( ) Change (X) Addition  
Name: HAYES, JENNIFER L  
Address: 30680 BAINBRIDGE ROAD  
City-St-Zip: SOLON, OH 44139

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 L. HAYES

CFO

01/05/2009

Electronic Signature of Signing Officer or Director

Date