

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000167

**FILED**  
**Mar 19, 2009**  
**Secretary of State**

**Entity Name:** ACCOUNTABILITIES STAFFING, INC.

**Current Principal Place of Business:**

195 ROUTE 9 SOUTH  
SUITE 109  
MANALAPAN, NJ 07726

**New Principal Place of Business:**

**Current Mailing Address:**

195 ROUTE 9 SOUTH  
SUITE 109  
MANALAPAN, NJ 07726

**New Mailing Address:**

**FEI Number:** 20-3239770

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** HARTLEY, ALLAN  
**Address:** 71 ALBA ROAD  
**City-St-Zip:** WELLESLEY, MA 02481

**Title:** CEO ( ) Delete  
**Name:** RAYMOND, JEFFREY  
**Address:** 195 ROUTE 9 SOUTH  
**City-St-Zip:** MANALAPAN, NJ 07726

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** CEO (X) Change ( ) Addition  
**Name:** RAYMOND, JEFFREY  
**Address:** 195 ROUTE 9 SOUTH, STE 109  
**City-St-Zip:** MANALAPAN, NJ 07728

**Title:** CFO (X) Change ( ) Addition  
**Name:** DELVECCHIA, STEVEN  
**Address:** 195 ROUTE 9 SOUTH  
**City-St-Zip:** MANALAPAN, NJ 07726

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:** JEFFREY RAYMOND

CEO

03/19/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date