

2012 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 16, 2012
Secretary of State

Entity Name: ELWOOD STAFFING SERVICES, INC.

Current Principal Place of Business:

4111 CENTRAL AVENUE
COLUMBUS, IN 47203

New Principal Place of Business:

4111 CENTRAL AVENUE
COLUMBUS, IN 47203 US

Current Mailing Address:

PO BOX 1024
COLUMBUS, IN 472021024

New Mailing Address:

PO BOX 1024
COLUMBUS, IN 47202 US

FEI Number: 35-1984435

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: C
Name: ELWOOD, DAVID L
Address: 4111 CENTRAL AVE.
City-St-Zip: COLUMBUS, IN 47203

Title: VC
Name: ELWOOD, MARK S
Address: 4111 CENTRAL AVE.
City-St-Zip: COLUMBUS, IN 47203

Title: PSD
Name: ELWOOD, JOHN A
Address: 4111 CENTRAL AVE.
City-St-Zip: COLUMBUS, IN 47203

Title: D
Name: ELWOOD, ELLA M
Address: 4111 CENTRAL AVE.
City-St-Zip: COLUMBUS, IN 47203

Title: VP
Name: ELWOOD, MICHAEL D
Address: 4111 CENTRAL AVE.
City-St-Zip: COLUMBUS, IN 47203

Title: T
Name: HUNNICUTT, STEVEN J
Address: 4111 CENTRAL AVE.
City-St-Zip: COLUMBUS, IN 47203

I hereby 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 all other like empowered.

SIGNATURE: JOHN A. ELWOOD

PSD

01/16/2012

Electronic Signature of Signing Officer or Director

Date