

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000002787

FILED  
Apr 16, 2010  
Secretary of State

**Entity Name:** ADECCO STRATEGIC ALLIANCES, INC.

**Current Principal Place of Business:**

175 BROAD HOLLOW RD  
MELVILLE, NY 11747

**New Principal Place of Business:**

**Current Mailing Address:**

175 BROAD HOLLOW RD  
MELVILLE, NY 11747

**New Mailing Address:**

**FEI Number:** 13-3692806

**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: PD  
Name: GILLIAM, THERON I  
Address: 175 BROAD HOLLOW RD  
City-St-Zip: MELVILLE, NY 11747

Title: VPT  
Name: DEPALO, LORELEI  
Address: 175 BROAD HOLLOW ROAD  
City-St-Zip: MELVILLE, NY 11747 US

Title: VPS  
Name: REARDON, GEORGE M  
Address: 175 BROAD HOLLOW RD  
City-St-Zip: MELVILLE, NY 11747

Title: VP  
Name: EHRHART, DAWN  
Address: 175 BROAD HOLLOW RD  
City-St-Zip: MELVILLE, NY 11747

Title: CFOD  
Name: NOLAN, STEPHEN  
Address: 175 BROAD HOLLOW ROAD  
City-St-Zip: MELVILLE, NY 11747

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: DAWN EHRHART

VP

04/16/2010

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

\_\_\_\_\_  
Date