

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000001957

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: INTELISTAF HEALTHCARE, INC.

## Current Principal Place of Business:

901 YAMATO ROAD  
SUITE 110  
BOCA RATON, FL 33431

## New Principal Place of Business:

## Current Mailing Address:

901 YAMATO ROAD  
SUITE 110  
BOCA RATON, FL 33431

## New Mailing Address:

FEI Number: 11-3257108

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS RD #221E  
PALM BEACH GARDENS, FL 33410 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 ( ) Delete  
Name: LITTLE, KEVIN S  
Address: 901 YAMATO RD SUITE 110  
City-St-Zip: BOCA RATON, FL 33431

Title: TD ( ) Delete  
Name: MESAGNO, MICHAEL J  
Address: 901 YAMATO RD SUITE 110  
City-St-Zip: BOCA RATON, FL 33431

Title: VP (X) Delete  
Name: THOMAS, MARK  
Address: 18W140 BUTTERFIELD STE 600  
City-St-Zip: OAKBROOK TERRACE, IL 60181

Title: SEC ( ) Delete  
Name: YESNER, JEFF  
Address: 901 YAMATO RD SUITE 110  
City-St-Zip: BOCA RATON, FL 33431

Title: VP (X) Delete  
Name: FOODEN, BRYAN T  
Address: 18 WEST 140 BUTTERFIELD RD STE 600  
City-St-Zip: OAKBROOK TERRACE, IL 60181

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: SECD (X) Change ( ) Addition  
Name: YESNER, JEFF  
Address: 901 YAMATO RD SUITE 110  
City-St-Zip: BOCA RATON, FL 33431

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: KEVIN S. LITTLE

PD

04/22/2009

Electronic Signature of Signing Officer or Director

Date