## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F99000005183

Title:

Name:

Address:

Entity Name: MAGLIO-ACCUFACTS PRE-EMPLOYMENT SCREENING, INC.

FILED Apr 30, 2007 Secretary of State

Current Pi	rincipal Place o	New Princ	New Principal Place of Business:				
2180 SR 434 W. SUITE 4150 LONGWOOD, FL 32779 US		100 CARILLON PARKWAY ST PETERSBURG, FL 33716			US		
Current M	ailing Address	New Maili	New Mailing Address:				
2180 SR 434 W. SUITE 4150 LONGWOOD, FL 32779		US	100 CARILLON PARKWAY ST PETERSBURG, FL 33716 US				
FEI Number:	13-4108277	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certifica	ate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
1201 HAYS TALLAHAS	SSEE, FL 32301		rnose of changing i	ts registered (	office or r	registered agent or both	
in the State		ionnits tins statement for the pu	rpose or changing r	is registered (	office of t	egistered agent, or both,	
SIGNATUR	RE:						
	Electronic	Signature of Registered Ager	ıt			Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	LUIZZO, PHIL 2180 SR 434 W., LONGWOOD, FL	32779 US	Title: Name: Address: City-St-Zip:	NALLATHAMBI 12395 1ST AM POWAY, CA 9	, ANAND ERICAN V 2064 US		
Title: Name: Address: City-St-Zip:	VPD ()E WATERS, JULIE 100 CARILLON P ST. PETERSBUR		Title: Name: Address: City-St-Zip:	COOD (X WATERS, JUL 100 CARILLON ST. PETERSBI	ÍE I PARKWA		
Title: Name: Address: City-St-Zip:	SD () E JARDINE, BRET 100 CARILLON P ST. PETERSBUR	ARKWAY	Title: Name: Address: City-St-Zip:	SEC (X JARDINE, BRE 100 CARILLON ST PETERSBL	TT I PARKWA		
Title: Name: Address: City-St-Zin:	D () E LONG, JOHN W 100 CARILLON P		Title: Name: Address: CitysSt-Zin:	CD (X LAMSON, JOH 100 CARILLON ST. PETERSBI	N I PARKWA		

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: BRET T. JARDINE SEC 04/30/2007

(X) Delete

100 CARILLON PARKWAY

LAMSON, JOHN C

City-St-Zip: ST. PETERSBURG, FL 33716 US

() Change () Addition