2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 25, 2005
Secretary of State

DOCUMENT# G86574

Entity Name: PERSONNEL SERVICES OF FORT MYERS, INC.

Current Principal Place of Business:

2015 W. FIRST STREET
STE. D
FT. MYERS, FL 339013112 US

New Principal Place of Business:

2015 WEST FIRST STREET
STE. D
FT. MYERS, FL 339013112 US

Current Mailing Address:

2015 W. FIRST STREET
STE. D
FT. MYERS, FL 339013112 US

New Mailing Address:

2015 WEST FIRST STREET
STE. D
FT. MYERS, FL 339013112 US

FEI Number: 59-2367180 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ROBERTS, TODD H.
2015 W. FIRST STREET
STE. D
FT. MYERS, FL 33901 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: ROBERTS, TODD H.
Address: 202 PINEBROOK DRIVE
City-St-Zip: FT. MYERS, FL 33907

Title: T ( ) Delete
Name: GAVITT, LAUREN
Address: 114 SW 20TH STREET
City-St-Zip: CAPE CORAL, FL 33991

Title: S ( ) Delete
Name: NEWLAND, JOHN
Address: 1906 NE 17TH PLACE
City-St-Zip: CAPE CORAL, FL

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TODD ROBERTS PD 08/25/2005
Electronic Signature of Signing Officer or Director — Date