2003 FOR PROFIT CORPORATION

May 05, 2003 8:00 am § Secretary of State UNIFORM BUSINESS REPORT (UBR) H06844 DOCUMENT # 05-05-2003 90281 011 ***150.00 1. Entity Name FCCI STAFFING SOLUTIONS, INC. Principal Place of Business Mailing Address 6300 UNIVERSITY PARKWAY 6300 UNIVERSITY PARKWAY SARASOTA FL 34240 SARASOTA FL 34240 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. X CHECK HERE IF MAKING CHANGES 4. FEI Number City & State City & State Applied For 59-2413933 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required -- - - 6. Name and Address of Current Registered Agent -7. Name and Address of New Registered Agent Name JACOBS, G.W. Street Address (P.O. Box Number is Not Acceptable) 6300 UNIVERSITY PKWY SARASOTA FL 34240 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. PD TITLE ☐ Delete TITLE ☐ Addition JACOBS, G.W. NAME NAME 6300 UNIVERSITY PKWY STREET ADDRESS STREET ADDRESS SARASOTA FL 34240 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition WEBBER, DAVID NAME NAME STREET ADDRESS 6300 UNIVERSITY PKWY STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34240 CITY-ST-ZIP TITLE Change TITLE Delete Addition NAME HABER, MARVIN S. NAME STREET ADDRESS STREET ADDRESS 6300 UNIVERSITY PKWY CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34240 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME MCMANUS, ROBERT NAME

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

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TITLE

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NAME

6300 UNIVERSITY PKWY

CURRIN, RUSSELL A JR.

6300 UNIVERSITY PKWY

SARASOTA FL 34240

BACHAND, CHARLES

SARASOTA FL 34240

6300 UNIVERSITY PKWY

SARASOTA FL 34240

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☐ Delete

Charles Bachand 4-28-03

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ATTACHMENT

FCCLSTAFFING SOLUTIONS, INC. FEIN: 59-2413933 FLORIDA 2003 UNIFORM BUSINESS REPORT DOCUMENT # H06844

#11. ADDITIONAL OFFICERS & DIRECTORS:

TITLE: NAME:

D

JOHN STAFFORD

STREET ADDRESS:

6300 UNIVERSITY PARKWAY

CITY-ST-ZIP:

SARASOTA, FL 34240

TITLE:

NAME: STREET ADDRESS:

ALBERT CONYERS 6300 UNIVERSITY PARKWAY

CITY-ST-ZIP:

SARASOTA, FL 34240

TITLE:

NAME:

ROBERT FLANDERS

STREET ADDRESS:

6300 UNIVERSITY PARKWAY

CITY-ST-ZIP: SARASOTA, FL 34240

TITLE:

NAME:

H. RONALD FOXWORTHY

STREET ADDRESS: CITY-ST-ZIP:

6300 UNIVERSITY PARKWAY

SARASOTA, FL 34240

TITLE:

NAME:

WILLIAM GETZEN

STREET ADDRESS: CITY-ST-ZIP:

STREET ADDRESS:

6300 UNIVERSITY PARKWAY

SARASOTA, FL 34240

TITLE:

NAME:

CHARLES STOTTLEMYER 6300 UNIVERSITY PARKWAY

CITY-ST-ZIP:

SARASOTA, FL 34240

TITLE:

D

NAME: STREET ADDRESS: **DEBRA DOUGLAS**

6300 UNIVERSITY PARKWAY

CITY-ST-ZIP:

SARASOTA, FL 34240

TITLE:

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NAME:

JOSEPH KEENE

STREET ADDRESS:

6300 UNIVERSITY PARKWAY

CITY-ST-ZIP:

SARASOTA, FL 34240