2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000002132

Entity Name: RE-EMPLOYMENT SPECIALISTS, LLC

FILED May 08, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

226 7TH ST SW 800 LOMAX STREET

WINTER HAVEN, FL 33880 106

JACKSONVILLE, FL 32204

Current Mailing Address: New Mailing Address:

P.O. BOX 9410 800 LOMAX STREET

WINTER HAVEN, FL 33883 106 JACKSONVILLE, FL 32204

FEI Number: 59-3696959 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GILLIS, CHARLES S
226 7TH ST SW
800 LOMAX STREET
WINTER HAVEN, FL 33880 US
106

JACKSONVILLE, FL 32204 US

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: CHARLES GILLIS 05/08/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name:GILLIS, CHARLES SName:GILLIS, CHARLES SAddress:226 7TH ST SWAddress:800 LOMAX STREET, STE 106

Address: 226 / IH ST SW Address: 800 LOMAX STREET, STE TO City-St-Zip: WINTER HAVEN, FL 33880 City-St-Zip: JACKSONVILLE, FL 32204

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CHARLES GILLIS MGR 05/08/2006