

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000016348

FILED
Apr 05, 2002 8:00 AM
Secretary of State

Entity Name: NURSE STAFFING TRAVELERS, LLC

Current Principal Place of Business:

933 LEE ROAD, SUITE 325
ORLANDO, FL 32810

New Principal Place of Business:

933 LEE ROAD
SUITE 325
ORLANDO, FL 32810

Current Mailing Address:

933 LEE ROAD, SUITE 325
ORLANDO, FL 32810

New Mailing Address:

933 LEE ROAD
SUITE 325
ORLANDO, FL 32810

FEI Number: 52-2343967

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRISTELLO, FELIX
933 LEE ROAD, SUITE 325
ORLANDO, FL 32810

Name and Address of New Registered Agent:

CRISTELLO, FELIX
933 LEE ROAD
SUITE 325
ORLANDO, FL 32810

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:

04/05/2002

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: NURSE STAFFING HOLDI, NG, LLC
Address: 933 LEE ROAD, SUITE 325
City-St-Zip: ORLANDO, FL 32810

ADDITIONS/CHANGES:

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 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: FELIX CRISTELLO, MGRM, NURSE STAFFING HOLD

MGRM

04/05/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date