

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024104

FILED
Mar 13, 2008
Secretary of State

Entity Name: SUPERIOR MEDICAL STAFFING, LLC

Current Principal Place of Business:

501 N. MAGNOLIA AVENUE
SUITE 101
ORLANDO, FL 32801

New Principal Place of Business:

933 LEE ROAD
SUITE 325
ORLANDO, FL 32810

Current Mailing Address:

501 N. MAGNOLIA AVENUE
SUITE 101
ORLANDO, FL 32801

New Mailing Address:

933 LEE ROAD
SUITE 325
ORLANDO, FL 32810

FEI Number: 75-3122834

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUDEK, SCOTT
501 N. MAGNOLIA AVENUE
SUITE 101
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

DUDEK, SCOTT
933 LEE ROAD
SUITE 325
ORLANDO, FL 32810 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:

03/13/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DUDEK, SCOTT
Address: 225 SOUTHERN PECAN CIRCLE, #203
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGRM () Delete
Name: CRISTELLO, FELIX
Address: 1131 ARBOR HILL CIRCLE
City-St-Zip: MINNEOLA, FL 34715

Title: MGRM () Delete
Name: ERNST, ERIC
Address: 14733 CATLIN ROAD
City-St-Zip: ORLANDO, FL 32828

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: CRISTELLO, FELIX
Address: 1542 BELFIORE WAY
City-St-Zip: WINDERMERE, FL 34786

Title: MGRM (X) Change () Addition
Name: CRISTELLO, MEGAN
Address: 1542 BELFIORE WAY
City-St-Zip: WINDERMERE, FL 34786

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 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

03/13/2008

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