

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L03000029457

FILED
May 11, 2007
Secretary of State**Entity Name:** BOARD CERTIFIED STAFFING, LLC**Current Principal Place of Business:**2800 4TH STREET NORTH
SUITE 191
ST. PETERSBURG, FL 33704**New Principal Place of Business:****Current Mailing Address:**2800 4TH STREET NORTH
SUITE 191
ST. PETERSBURG, FL 33704**New Mailing Address:****FEI Number:** 20-0146277 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**INCORPORATE USA, INC.
3150 SANDY RIDGE DR
CLEARWATER, FL 33761 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

MANAGING MEMBERS/MANAGERS:**Title:** MGR () Delete
Name: GIBSON, PAUL B
Address: 2800 4TH STREET NORTH, SUITE 191
City-St-Zip: SAINT PETERSBURG, FL 33704**Title:** MGR (X) Delete
Name: WOLFE, AGNES M
Address: 2800 4TH STREET NORTH, SUITE 191
City-St-Zip: SAINT PETERSBURG, FL 33704**ADDITIONS/CHANGES:****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 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: PAUL GIBSON

PRES

05/11/2007

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