



# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

<b>DOCUMENT # L03000057469</b> 1. Entity Name CAREERSUSA SPRINGFIELD, LLC	
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Principal Place of Business 6501 CONGRESS AVE. SUITE 200 BOCA RATON, FL 33487	Mailing Address 6501 CONGRESS AVE. SUITE 200 BOCA RATON, FL 33487
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**DO NOT WRITE IN THIS SPACE**

FILED  
05 APR 14 AM 11:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



01042005No Chg-LLC CR2E083 (10/03)

4. FEI Number 20-0568488	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

OUNJIAN, JENNIFER L  
6501 CONGRESS AVE.  
SUITE 200  
BOCA RATON, FL 33487

**DO NOT WRITE  
IN THIS SPACE**

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

**Filing Fee is \$50.00  
Due by May 1, 2005**

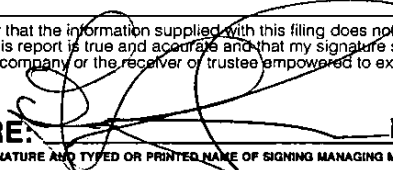
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CAREERS USA, INC 6501 CONGRESS AVE. BOCA RATON, FL 33487
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11. 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 is true and accurate and that my 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:**  **Marilyn J. Ounjian, MM** (561) 995-7000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #