2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000012596

RESNECK, ALÁN

780 E MARKET ST, STE 120

WEST CHESTER, PA 19382

Name:

Address:

City-St-Zip:

Entity Name: STAFF MANAGEMENT GROUP, LLC

FILED Apr 19, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	MARKET STRI ESTER, PA 19	EET, SUITE 120 3382		
Current Mailing Address:			New Mailing Address:	
	MARKET STRI ESTER, PA 19	EET, SUITE 120 1382		
FEI Number:	32-0106558	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:	Name and Address of New Registered Agent:	
The above	PS DR. ON, FL 33432 named entity s		ourpose of changing its registere	ed office or registered agent, or both
in the State	of Florida.			
SIGNATUR		i Cianatan af Danistan d An		Data
Electronic Signature of Registered Age				
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	AMANDA STAFF	Delete FING GROU, P, LLC KET STREET, SUITE 120 R, PA 19382	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () OMAHEN, DENN 172 NEW STRE NEW BRUNSWI	ET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () DENINO, WILLI 172 NEW STRE NEW BRUSWIC	ET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	MGR ()	Delete	Title:	() Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ALAN RESNECK MGR 04/19/2006