2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2008
Secretary of State

DOCUMENT# L04000012901

Entity Name: TOPTALENT STAFFING, LLC

Current Principal Place of Business:

210 S. BUMBY AVE. SUITE A
ORLANDO, FL 32803 US

New Principal Place of Business:

210 S. BUMBY AVENUE
SUITE A
ORLANDO, FL 32803 US

Current Mailing Address:

210 S. BUMBY AVE. SUITE A
ORLANDO, FL 32803 US

New Mailing Address:

210 S. BUMBY AVENUE
SUITE A
ORLANDO, FL 32803 US

FEI Number: 26-0318376 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERRING, ROBERT R
16446 MYERS COURT
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

HERRING, ROBERT R
210 S BUMBY AVENUE
SUITE A
CLERMONT, FL 34711 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: 01/09/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: HERRING, KAY P
Address: 16446 MYERS COURT
City-St-Zip: CLERMONT, FL 34711 US

Title: MGR (X) Delete
Name: HERRING, ROBERT R
Address: 16446 MYERS COURT
City-St-Zip: CLERMONT, FL 34711 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: HERRING, ROBERT R
Address: 210 S BUMBY AVENUE, SUITE A
City-St-Zip: ORLANDO, FL 32803 US

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: ROBERT R HERRING MGRM 01/09/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date