

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008350

Entity Name: NEW AGE STAFFING LLC

FILED
Apr 09, 2006
Secretary of State

Current Principal Place of Business:

662 GLADES CR.
SUITE 108
ATLTMONTE SPRGS, FL 32714

Current Mailing Address:

662 GLADES CR.
SUITE 108
ATLTMONTE SPRINGS, FL 32714

New Principal Place of Business:

4300 SOUTH SEMORAN BLVD.
SUITE 205
ORLANDO, FL 32822

New Mailing Address:

4300 SOUTH SEMORAN BLVD.
SUITE 205
ORLANDO, FL 32822

FEI Number: 75-3180639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CURTIS, JANET K
662 GLADES CR.
SUITE 108
ATLTMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

CURTIS, JANET K
4300 SOUTH SEMORAN BLVD.
SUITE 205
ORLANDO, FL 32822 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:

04/09/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PRES () Change (X) Addition
Name: CURTIS, JANET K PRES
Address: 1919 HIGH GLEN CT S.
City-St-Zip: LAKELAND, FL 33813

Title: MGR () Change (X) Addition
Name: CURTIS, MICHAEL R MGR
Address: 1919 HIGH GLEN CT S.
City-St-Zip: LAKELAND, FL 33813

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.

SIGNATURE: MICHAEL R CIRTIS

MGR

04/09/2006

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