

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008350

Entity Name: NEW AGE STAFFING LLC

FILED  
Apr 13, 2009  
Secretary of State

## Current Principal Place of Business:

4300 SOUTH SEMORAN BLVD.  
SUITE 205  
ORLANDO, FL 32822

## New Principal Place of Business:

2161 CR 540 A  
SUITE 248  
LAKELAND, FL 33813

## Current Mailing Address:

4300 SOUTH SEMORAN BLVD.  
SUITE 205  
ORLANDO, FL 32822

## New Mailing Address:

2161 CR 540 A  
SUITE 248  
LAKELAND, FL 33813

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  
4300 SOUTH SEMORAN BLVD.  
SUITE 205  
ORLANDO, FL 32822 US

## Name and Address of New Registered Agent:

CURTIS, JANET K  
2161 CR 540 A  
SUITE 248  
LAKELAND, FL 33813 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:

04/13/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

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

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

## 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: JANET K CURTIS

PRES

04/13/2009

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