

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000044477

FILED
Apr 27, 2007
Secretary of State

Entity Name: LABOR SOLUTIONS OF NORTH FLORIDA, LLC

Current Principal Place of Business:

501 EAST TENNESSEE STREET
SUITE D
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

501 EAST TENNESSEE STREET
SUITE D
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 20-4787559

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASCH, JOSEPH C
1900 CORPORSTE BOULEVARD, NW
SUITE 400 EAST
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

STEPHENS, M. LANE
501 EAST TENNESSEE STREET
SUITE D
TALLAHASSEE, FL 32301 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: M. LANE STEPHENS

04/27/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: STEPHENS, M. LANE
Address: 338 N. 8TH STREET
City-St-Zip: QUINCY, FL 32351

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

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

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

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

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PTR () Change (X) Addition
Name: TROUTMAN, BAXTER G
Address: 501 E TENNESSEE STREET, SUITE D
City-St-Zip: TALLAHASSEE, FL 32301

Title: PTR () Change (X) Addition
Name: SMITH, CLARK
Address: 501 E TENNESSEE STREET, SUITE D
City-St-Zip: TALLAHASSEE, FL 32301

Title: PTR () Change (X) Addition
Name: MAXWELL, MARK
Address: 501 E TENNESSEE STREET, SUITE D
City-St-Zip: TALLAHASSEE, FL 32301

Title: PTR () Change (X) Addition
Name: REEVES, RICHARD
Address: 501 E TENNESSEE STREET, SUITE D
City-St-Zip: TALLAHASSEE, FL 32301

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: M. LANE STEPHENS

PTR

04/27/2007

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