2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# L07000084627

Entity Name: MEDICAL PROFESSIONAL STAFFING L.L.C.

Current Principal Place of Business:

25 WALNUT LANE
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

25 WALNUT LANE
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SNOWDEN, SAMANTHA A
25 WALNUT LANE
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: SNOWDEN, JOHN A
Address: 25 WALNUT LANE
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES:

Title: MEBR (X) Change ( ) Addition
Name: SNOWDEN, SAMANTHA A
Address: 25 WALNUT LANE
City-St-Zip: ORMOND BEACH, FL 32174

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: SAMANTHA SNOWDEN MEBR 04/30/2008

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