2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 07, 2008
Secretary of State

DOCUMENT# L07000118875

Entity Name: PHOENIX WORKFORCE SOLUTIONS, LLC

Current Principal Place of Business:

774 SOUTH PENNSYLVANIA AVE
WINTER PARK, FL 32789

New Principal Place of Business:

217 N KIRKMAN RD
SUITE 2
ORLANDO, FL 32811

Current Mailing Address:

774 SOUTH PENNSYLVANIA AVE
WINTER PARK, FL 32789

New Mailing Address:

774 S PENNSYLVANIA AVE
WINTER PARK, FL 32789

FEI Number: 45-0581395 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PLOTNIK, GARY
774 SOUTH PENNSYLVANIA AVE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

PLOTNIK, GARY
774 S PENNSYLVANIA AVE
WINTER PARK, FL 32789 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: GARY R. PLOTNIK 02/07/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: PLOTNIK, GARY
Address: 774 SOUTH PENNSYLVANIA AVE
City-St-Zip: WINTER PARK, FL 32789

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

ADDITIONS/CHANGES:

Title: MR (X) Change ( ) Addition
Name: PLOTNIK, GARY R PRES
Address: 774 SOUTH PENNSYLVANIA AVE
City-St-Zip: WINTER PARK, FL 32789

Title: MRS ( ) Change (X) Addition
Name: ANCIRA, THERESA
Address: 1620 WOODLAND
City-St-Zip: WINTER PARK, FL 32789

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: GARY R. PLOTNIK MGR 02/07/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date