

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000052149

FILED
Jan 08, 2009
Secretary of State

Entity Name: LABOR FINDERS OF FLORIDA, LLC

Current Principal Place of Business:

11501 PLANTSIDE DRIVE, SUITE 12
LOUISVILLE, KY 40299

New Principal Place of Business:

Current Mailing Address:

11501 PLANTSIDE DRIVE, SUITE 12
LOUISVILLE, KY 40299

New Mailing Address:

PO BOX 99189
LOUISVILLE, KY 40269

FEI Number: 26-2691429

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

TAMES, DIANE VP
760 SE PORT ST. LUCIE BLVD.
PORT ST. LUCIE, FL 34984 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: DIANE TAMES

01/08/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: TAMES, WALDO
Address: P.O. BOX 99189
City-St-Zip: JEFFERSONTOWN, KY 402690189

Title: MGR () Delete
Name: TAMES, DIANE
Address: P.O. BOX 99189
City-St-Zip: JEFFERSONTOWN, KY 402690189

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TAMES, WALDO
Address: P.O. BOX 99189
City-St-Zip: LOUISVILLE, KY 402690189

Title: MGR (X) Change () Addition
Name: TAMES, DIANE
Address: P.O. BOX 99189
City-St-Zip: LOUISVILLE, KY 402690189

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: DIANE TAMES

VP

01/08/2009

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