

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000056055

**FILED**  
**Feb 13, 2012**  
**Secretary of State**

**Entity Name:** L F STAFFING OF SOUTH FLORIDA LLC

**Current Principal Place of Business:**

5350 10TH AVENUE NORTH  
SUITE # 6  
LAKE WORTH, FL 33463

**New Principal Place of Business:**

**Current Mailing Address:**

5350 10TH AVENUE NORTH  
SUITE # 6  
LAKE WORTH, FL 33463

**New Mailing Address:**

**FEI Number:** 27-3005738

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DOXEY, DOUGLAS J  
5350 10TH AVENUE NORTH  
LAKE WORTH, FL 33463 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  
**Name:** DOXEY, JOANN  
**Address:** 10900 AVENIDA DEL RIO  
**City-St-Zip:** DELRAY BEACH, FL 33463

**Title:** MGRM  
**Name:** DOXEY, DOUGLAS  
**Address:** 10900 AVENIDA DEL RIO  
**City-St-Zip:** DELRAY BEACH, FL 33463

**Title:** MGRM  
**Name:** DUKEMAN, STUART  
**Address:** 6009 TINLEY MILL DRIVE  
**City-St-Zip:** HAYMARKET, VA 20169

**Title:** MGRM  
**Name:** SEELEY, ED  
**Address:** 13981 FLAGTREE PLACE  
**City-St-Zip:** MANASSAS, VA 20112

I hereby 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:** DOUGLAS J DOXEY

MGR

02/13/2012

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