

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000004967

Entity Name: NURSE STAFFING, LLC

FILED
May 10, 2006
Secretary of State

Current Principal Place of Business:

220 OLD NEW BRUNSWICK ROAD, SUITE 101
PISCATAWAY, NJ 08854

New Principal Place of Business:

220 OLD NEW BRUNSWICK ROAD
SUITE 101
PISCATAWAY, NJ 08854

Current Mailing Address:

220 OLD NEW BRUNSWICK ROAD, SUITE 101
PISCATAWAY, NJ 08854

New Mailing Address:

220 OLD NEW BRUNSWICK ROAD
SUITE 101
PISCATAWAY, NJ 08854

FEI Number: 20-1858057 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: O'DONNELL, MICHAEL J
Address: 220 OLD NEW BRUNSWICK ROAD, SUITE 101
City-St-Zip: PISCATAWAY, NJ 08854

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES D. PYDEN

CFO

05/10/2006

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