2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

DOCUMENT # M05000001776

1. Entity Name

SNELLING FRANCHISING, L.L.C.



Principal Place of Business

SIGNATURE:

Mailing Address

12801 N. CENTRAL EXPRESSWAY, SUITE 700 DALLAS, TX 75243

12801 N. CENTRAL EXPRESSWAY, SUITE 700 DALLAS, TX 75243

FILED Feb 08, 2006 8:00 am Secretary of State

02-08-2006 90087 006 ****50.00

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01102006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 32-0139700

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

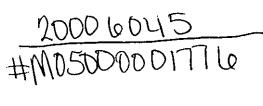
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

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the colligations of registered agent.			
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2006			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PAULK, MELINDA S 12801 N. CENTRAL EXPRESSWAY, SUITE 700 DALLAS, TX 75243		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PAULK, ROBERT R 12801 N. CENTRAL EXPRESSWAY, SUITE 700 DALLAS, TX 75243		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MCANINCH, BARBARA A 12801 N. CENTRAL EXPRESSWAY, SUITE 700 DALLAS, TX 75243	DO NOT V	WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS S	SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.			

8. 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. Fam familiar with, and accept

ATTACHMENT





VIA: UPS Express Delivery

February 06,2006

Florida Department of State Division of Corporations 2670 Executive Center Circle Suite 100 Tallahassee, FL 32301

Dear Sir or Madam:

Enclosed are the annual reports for Snelling Franchising, LLC and Snelling Staffing, LLC.

Attached are the checks to cover the filing costs.

If you have any questions or concerns please contact me at 972-776-1398.

Sincerely,

Patricia Gilmore Legal Assistant