

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000002309

Entity Name: SNELLING STAFFING, LLC

FILED
Apr 03, 2007
Secretary of State

Current Principal Place of Business:

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

New Principal Place of Business:

12801 N. CENTRAL EXPRESSWAY
SUITE 600
DALLAS, TX 75243

Current Mailing Address:

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

New Mailing Address:

12801 N. CENTRAL EXPRESSWAY
SUITE 600
DALLAS, TX 75243

FEI Number: 20-2268334

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

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: TILTON, LYNN
Address: 40 WALL STREET, 25TH FLOOR
City-St-Zip: NEW YORK, NY 10005

Title: MGR () Delete
Name: HARRIS, PETER H
Address: 12801 N CENTRAL EXPRESS WAY SUITE 700
City-St-Zip: DALLAS, TX 75243

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: HARRIS, PETER H
Address: 12801 N CENTRAL EXPRESS WAY, SUITE 600
City-St-Zip: DALLAS, TX 75243

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: PETER H. HARRIS

MRG

04/03/2007

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