2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M96000000022

Entity Name: MANPOWER FRANCHISES, LLC

FILED Mar 10, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5301 NORTH IRONWOOD ROAD 100 MANPOWER PLACE MILWAUKEE, WI 53217 MILWAUKEE, WI 53212

Current Mailing Address: New Mailing Address:

ATTN: CORPORATE TAX 5301 N. IRONWOOD RD. 100 MANPOWER PLACE MILWAUKEE, WI 53217 MILWAUKEE, WI 53212

FEI Number: 39-1837629 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

RS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition Name: LYNCH, MICHAEL J Name: VACHALEK, MARK

Address: 5301 NORTH IRONWOOD ROAD Address: 100 MANPOWER PLACE
City-St-Zip: MILWAUKEE, WI 53217 City-St-Zip: MILWAUKEE, WI 53212

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 TOTH, MARK
 Name:
 TOTH, MARK

 Address:
 5301 N IRONWOOD RD
 Address:
 100 MANPOWER PLACE

City-St-Zip: MILWAUKEE, WI 53217 City-St-Zip: MILWAUKEE, WI 53212

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 PRISING, JONAS
 Name:
 PRISING, JONAS

 Address:
 5301 N IRONWOOD RD
 Address:
 100 MANPOWER PLACE

 City-St-Zip:
 MILWAUKEE, WI 53217
 City-St-Zip:
 MILWAUKEE, WI 53212

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: KREY, JULIE Name: KREY, JULIE

Address: 5301 N IRONWOOD RD. Address: 100 MANPOWER PLACE City-St-Zip: MILWAUKEE, WI 53217 City-St-Zip: MILWAUKEE, WI 53212

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: MARK VACHALEK MGR 03/10/2008