

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M97000000179

FILED  
May 26, 2005  
Secretary of State

Entity Name: CBS PERSONNEL SERVICES, LLC

**Current Principal Place of Business:**

435 ELM STREET  
CINCINNATI, OH 45202

**New Principal Place of Business:**

435 ELM STREET  
SUITE 300  
CINCINNATI, OH 45202

**Current Mailing Address:**

435 ELM STREET  
STE 300  
CINCINNATI, OH 45202

**New Mailing Address:**

FEI Number: 31-1481071      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:**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: ROBERT LEE BROWN, IN, C.  
Address: 435 ELM STREET  
City-St-Zip: CINCINNATI, OH 45202

**ADDITIONS/CHANGES:**

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

Title: MGRM ( ) Delete  
Name: EMPLOYEE MANAGEMENT, SERVICES II, I N C.  
Address: 435 ELM STREET  
City-St-Zip: CINCINNATI, OH 45202

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 Section 119.07(3)(i), 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: FREDERICK L. KOHNKE

P

05/26/2005

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