2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2005
Secretary of State

DOCUMENT# N03000004421

Entity Name: THE STAFF INCORPORATED

Current Principal Place of Business:

11025 PINTO DR.
HUDSON, FL 34669

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1776
ELFERS, FL 34680

New Mailing Address:

FEI Number: 56-2376140 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

OTOK BEN-HVAR, SECRETARY
P.O. BOX 1776
ELFERS, FL 34680 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

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: HENDERSON, MD, ROBERT L COLONEL
Address: 2680 HIPSLEY MILL RD
City-St-Zip: WOODBINE, MD 21797

Title: VP ( ) Delete
Name: CURRAN, ROSALIE DR.
Address: 2 CONVENT RD., P.O. BOX 476
City-St-Zip: MORRISTOWN, NJ 07961 04

Title: SEC. ( ) Delete
Name: BEN-HVAR, OTOK A
Address: P.O. BOX 1776
City-St-Zip: ELFERS, FL 34680

Title: TREA ( ) Delete
Name: STEVEN, ELLWANGER CPA
Address: 118 LOCUST DR
City-St-Zip: UPPER NYACK, NY 10960

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OTOK BEN-HVAR SEC 01/05/2005

Electronic Signature of Signing Officer or Director — Date