

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004421

FILED
Feb 12, 2009
Secretary of State

Entity Name: THE STAFF INCORPORATED

Current Principal Place of Business:

13525 DINGUS LANE
HUDSON, FL 34667

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 ()

Name and Address of Current Registered Agent:

OTOK BEN-HVAR, SECRETARY
13525 DINGUS LANE
HUDSON, FL 34667 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: 431 GRAND AVENUE
City-St-Zip: SARATOGA SPRINGS, NY 12866

Title: COB () Delete
Name: VILLEANEAU, WAYNE
Address: 117 WEST MILAN ROAD
City-St-Zip: BERLIN, NH 03570

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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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 exemption stated in Chapter 119, 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

02/12/2009

Electronic Signature of Signing Officer or Director

Date