## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000010301

FILED Mar 24, 2009 Secretary of State

Entity Name: FLORIDA ASSOCIATION OF PERSONNEL SERVICES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2180 W STATE ROAD 434 **SUITE 4160** LONGWOOD, FL 32779 **New Mailing Address: Current Mailing Address:** 2180 W STATE ROAD 434 **SUITE 4160** LONGWOOD, FL 32779 FEI Number: 20-5862820 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: SAUER, GREG 2180 W STATE ROAD 434 **SUITE 4160** LONGWOOD, FL 32779 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SAUER, GREG Name: Name: 2180 W STATE ROAD 434, SUITE 4160 Address: Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete DIMASCIO, SUZETTE Name: Name: THOMPSON, JONI Address: 400 LEXINGTON GREEN LANE Address: 175 RIVER OAKS CIRCLE City-St-Zip: SANFORD, FL 32771 City-St-Zip: SANFORD, FL 32771 Title: () Delete Title: (X) Change ( ) Addition SCHWINGHAMER, JENNA COE, NICOLE Name: Name: 10150 HIGHLAND MANOR DRIVE, SUITE 200 2180 WEST STATE ROAD 434 SUITE 4160 Address: Address: City-St-Zip: TAMPA, FL 33610 City-St-Zip: LONGWOOD, FL 32779 Title: STD (X) Delete Title: () Change () Addition Name: BENNETT, BETH Name: 2180 W STATE ROAD 434, SUITE 4160 Address: Address: City-St-Zip: LONGWOOD, FL 32779 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: GREG SAUER D 03/24/2009