

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000021314

Entity Name: LABOR SOLUTIONS, INC.

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

212 1ST STREET S.  
WINTER HAVEN, FL 33880

## **New Principal Place of Business:**

212 1ST STREET S.E.  
WINTER HAVEN, FL 33880

## **Current Mailing Address:**

212 1ST STREET S.  
WINTER HAVEN, FL 33880

## **New Mailing Address:**

212 1ST STREET S.E.  
WINTER HAVEN, FL 33880

FEI Number: 56-2369581

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

TROUTMAN, BAXTER G  
212 1ST STREET S.  
WINTER HAVEN, FL 33880 US

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

TROUTMAN, BAXTER G  
212 1ST STREET S.E.  
WINTER HAVEN, FL 33880 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

01/06/2011

Date

## **OFFICERS AND DIRECTORS:**

Title: D  
Name: TROUTMAN, BAXTER G  
Address: 212 1ST STREET S.E.  
City-St-Zip: WINTER HAVEN, FL 33880

Title: D  
Name: TROUTMAN, REBECCA  
Address: 212 1ST STREET S.E.  
City-St-Zip: WINTER HAVEN, FL 33880

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BAXTER G. TROUTMAN

CEO

01/06/2011

Electronic Signature of Signing Officer or Director

Date