

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000027084

**FILED**  
**Mar 20, 2011**  
**Secretary of State**

**Entity Name:** STAFFING CONCEPTS IV, INC.

**Current Principal Place of Business:**

4224 W. HENDERSON BLVD.  
TAMPA, FL 33629 US

**New Principal Place of Business:**

**Current Mailing Address:**

4224 W. HENDERSON BLVD.  
TAMPA, FL 33629 US

**New Mailing Address:**

**FEI Number:** 16-1657374

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:** PD  
**Name:** HARDIN, HENRY C III  
**Address:** 2435 TECH CENTER PKWY  
**City-St-Zip:** LAWRENCEVILLE, GA 30043 US

**Title:** S  
**Name:** EDWARDS, WILLIAM  
**Address:** 4224 W. HENDERSON BLVD.  
**City-St-Zip:** TAMPA, FL 33629 US

**Title:** CFO  
**Name:** HUBBARD, DEBRA  
**Address:** 2435 TECH CENTER PKWY  
**City-St-Zip:** LAWRENCEVILLE, GA 30043

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:** WILLIAM EDWARDS

S

03/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date