2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000044574

Entity Name: GULF COAST STAFFING SERVICES, INC.

FILED Jul 22, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3596 TAN	IIAMI TRAIL		3880 TAMIAMI TR		
ST S SARASOTA, FL 34237		SUITE A			
SARASO	TA, FL 34237		PORT CHARLOTTE	FL 33952	
Current N	lailing Address:		New Mailing Addres	ss:	
2480 FRL	IITVILLE RD				
STE 8					
SARASO	TA, FL 34237				
FEI Numbe	r: 65-1184827 FEI Nu	mber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Current I	Registered Agent:	Name and Address	of New Registered Agent:	
7227 SWI	C, MARIE A TCHGRASS TRAIL TON, FL 34202 US				
-					
	e named entity submits to se of Florida.	tnis statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
	e of Florida.	this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
in the Stat	e of Florida. * RE:	this statement for the p ture of Registered Age		ed office or registered agent, or both, Date	
in the Stat SIGNATU	e of Florida. * RE:	ture of Registered Age			
in the Stat SIGNATU Election Ca	e of Florida. RE: Electronic Signa	ture of Registered Age	ent		
in the Stat SIGNATU Election Ca	e of Florida. RE: Electronic Signa mpaign Financing Trust Fu	ture of Registered Age	ent	Date	
in the Stat SIGNATU Election Ca OFFICER Title:	e of Florida. RE: Electronic Signa mpaign Financing Trust Fu S AND DIRECTORS:	ture of Registered Age	ent ADDITIONS/CHANG	Date BES TO OFFICERS AND DIRECTOR	
in the Stat SIGNATU Election Ca OFFICER Title: Name:	e of Florida. RE: Electronic Signa mpaign Financing Trust Fu S AND DIRECTORS: D () Delete	iture of Registered Age and Contribution ().	ent ADDITIONS/CHANG Title:	Date BES TO OFFICERS AND DIRECTOR	
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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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIE A LEBLANC D 07/22/2005