

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000122491

Entity Name: ALERT MEDICAL STAFFING, INC.

FILED  
Jan 25, 2007  
Secretary of State

## Current Principal Place of Business:

121 BEACONS BEND ROAD  
CRESTVIEW, FL 32536

## New Principal Place of Business:

5418 LEE FARM BOULEVARD  
CRESTVIEW, FL 32536

## Current Mailing Address:

121 BEACONS BEND ROAD  
CRESTVIEW, FL 32536

## New Mailing Address:

5418 LEE FARM BOULEVARD  
CRESTVIEW, FL 32536

FEI Number: 20-0391626

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JUSTICE, ROBERT B  
121 BEACONS BEND ROAD  
CRESTVIEW, FL 32536 US

## Name and Address of New Registered Agent:

JUSTICE, ROBERT B  
5418 LEE FARM BOULEVARD  
CRESTVIEW, FL 32536 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:

01/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: JUSTICE, ROBERT B  
Address: 121 BEACONS BEND ROAD  
City-St-Zip: CRESTVIEW, FL 32536

Title: STD ( ) Delete  
Name: IRWIN, JOHN A  
Address: 3000 RED FERN DRIVE  
City-St-Zip: PENSACOLA, FL 32533

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: JUSTICE, ROBERT B  
Address: 5418 LEE FARM BOULEVARD  
City-St-Zip: CRESTVIEW, FL 32536

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

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT JUSTICE

PD

01/25/2007

Electronic Signature of Signing Officer or Director

Date