2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000084415

Entity Name: AARON NURSE REGISTRY AND STAFFING, INC.

FILED May 01, 2006 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2115 6TH AVENUE WEST 3501 CORTEZ RD. W. BRADENTON, FL 34205

BRADENTON FL 34210

Current Mailing Address: New Mailing Address:

2115 6TH AVENUE WEST P.O. BOX #331

BRADENTON, FL 34205 BRADENTON, FL 34206

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

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

ROWE, RONALD S ROWE, RONALD S 2115 6TH AVENUE WEST 610 RIVIERA DUNES WAY BRADENTON, FL 34205 US #304 PALMETTO, FL 34221 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: 05/01/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title: () Delete Title:

KANE, JOYCE A KANE, JOYCE A Name: Name: 2115 6TH AVENUE WEST Address: 610 RIVIERA DUNES WAY #304 Address: City-St-Zip: BRADENTON, FL 34205 City-St-Zip: PALMETTO, FL 34221

() Delete Title: VΡ Title: VΡ (X) Change () Addition

ROWE, RONALD S Name: Name: ROWE, RONALD S

2115 6TH AVENUE WEST Address: 610 RIVIERA DUNES WAY #304 Address: BRADENTON, FL 34205 PALMETTO, FL 34221 City-St-Zip: 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 Statutés. 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.

VΡ SIGNATURE: RONALD ROWE 05/01/2006