

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 16, 2008 8:00 am
Secretary of State

07-16-2008 90010 030 ***550.00

DOCUMENT # P07000045854

1. Entity Name
CENTRAL FLORIDA STAFFING GROUP, INC.



Principal Place of Business
**444 BRIDGETOWN COURT
SATELLITE BEACH, FL 32937**

Mailing Address
**444 BRIDGETOWN COURT
SATELLITE BEACH, FL 32937**



2. Principal Place of Business - No P.O. Box #

1103 Hibiscus BLVD

3. Mailing Address

1103 Hibiscus BLVD

Suite, Apt. #, etc.

STE 306

Suite, Apt. #, etc.

STE 306

07142008

Chg-P

CR2E034 (12/06)

City & State
MELBOURNE FL

City & State
MELBOURNE FL

4. FEI Number

20-8893368

Applied For

Not Applicable

Zip

32901

Country

USA

Zip

32901

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**STONICH, TAMARA L
444 BRIDGETOWN COURT
SATELLITE BEACH, FL 32937**

7. Name and Address of New Registered Agent

Name

STONICH, TAMARA L

Street Address (P.O. Box Number is Not Acceptable)

1103 Hibiscus BLVD

STE 306

City **MELBOURNE**

FL

Zip Code

32901

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Tamara L Stonich

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/14/08

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **STONICH, TAMARA L**
STREET ADDRESS **444 BRIDGETOWN COURT**
CITY-ST-ZIP **SATELLITE BEACH, FL 32937**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
NAME **STONICH, TAMARA L**
STREET ADDRESS **1103 Hibiscus BLVD STE 306**
CITY-ST-ZIP **MELBOURNE FL 32901**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Tamara L Stonich

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/14/08 (321) 725-4100

Date

Daytime Phone #