2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2012
Secretary of State

DOCUMENT# P10000020297

Entity Name: AMERICAN STAFF MANAGEMENT INSURANCE SERVICES INC.

Current Principal Place of Business:

27605 CASHFORD CIRCLE
SUITE 102
WESLEY CHAPEL, FL 33544

New Principal Place of Business:

Current Mailing Address:

27605 CASHFORD CIRCLE
SUITE 102
WESLEY CHAPEL, FL 33544

New Mailing Address:

FEI Number: 27-2113327 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORAN, JAMES T
27605 CASHFORD CIRCLE
SUITE 102
WESLEY CHAPEL, FL 33544 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: MORAN, JAMES
Address: 27605 CASHFORD CIRCLE #102
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: VTD
Name: PARRY, JENNIFER
Address: 27605 CASHFORD CIRCLE #102
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: SD
Name: MORAN, THOMAS
Address: 27605 CASHFORD CIRCLE #102
City-St-Zip: WESLEY CHAPEL, FL 33544

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: JAMES MORAN PD 04/24/2012

Electronic Signature of Signing Officer or Director — Date