2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P28830

Entity Name: DOBBS TEMPORARY SERVICES, INC.

FILED Mar 31, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4600 WEST CYPRESS ST

SUITE 110 SUITE 500

TAMPA, FL 33607 US MINNEAPOLIS, MN 55403 US

Current Mailing Address: New Mailing Address:

50 S. 10TH STREET SUITE 500

MINNEAPOLIS, MN 55403 US

FEI Number: 41-1655052 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331 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:

Electronic Signature of Registered Agent Date

50 S. 10TH STREET

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 ROBERT, KEVIN
 Name:
 MOREL, CLAY

 Address:
 50 S 10TH ST STE 500
 Address:
 1990 POST OAK BLVD SUITE G

City-St-Zip: MINNEAPOLIS, MN 55403 City-St-Zip: HOUSTON, TX 77042

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

Name: GILBERTSON, ROSS A Name: MORRIS, MICHAEL

Address: 50 S 10TH ST STE 500 Address: 13355 NOEL ROAD SUITE 1340

City-St-Zip: MINNEAPOLIS, MN 55403 City-St-Zip: DALLAS, TX 75240

Title: V () Delete Title: () Change () Addition

 Name:
 WINTERRINGER, CANDICE A
 Name:

 Address:
 5215 NORTH OCONNOR #925
 Address:

 City-St-Zip:
 IRVING, TX 75039
 City-St-Zip:

Title: ST () Delete Title: () Change () Addition

 Name:
 ALLEN, TIMOTHY S
 Name:

 Address:
 50 S 10TH ST STE 500
 Address:

 City-St-Zip:
 MINNEAPOLIS, MN 55403
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TIMOTHY ALLEN ST 03/31/2009