

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P28830

FILED  
Apr 01, 2010  
Secretary of State

**Entity Name:** DOBBS TEMPORARY SERVICES, INC.

**Current Principal Place of Business:**

50 S. 10TH STREET  
SUITE 500  
MINNEAPOLIS, MN 55403 US

**New Principal Place of Business:**

**Current Mailing Address:**

50 S. 10TH STREET  
SUITE 500  
MINNEAPOLIS, MN 55403 US

**New Mailing Address:**

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

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** CEO  
**Name:** MOREL, CLAY  
**Address:** 10777 WESTHEIMER RD, SUITE 130  
**City-St-Zip:** HOUSTON, TX 77042

**Title:** VP  
**Name:** MORRIS, MICHAEL  
**Address:** 13355 NOEL ROAD SUITE 1340  
**City-St-Zip:** DALLAS, TX 75240

**Title:** VP  
**Name:** WINTERRINGER, CANDICE A  
**Address:** 7301 NORTH STATE HIGHWAY 161  
**City-St-Zip:** IRVING, TX 75039

**Title:** VP  
**Name:** SHREIFELS, DEANN  
**Address:** 50 S 10TH ST STE 500  
**City-St-Zip:** MINNEAPOLIS, MN 55403

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: DEANN SCHREIFELS

VP

04/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date