SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 AUG -4 AM 10:12

DOCUMENT # **P93000012345 (3)**

1. Corporation Name
KELLY SOLUTIONS COMPANY, INC.

Principal Place of Business	Mailing Address
10 BREEDS HILL COURT LITTLE ROCK AR 72211 US	10 BREEDS HILL COURT LITTLE ROCK AR 72211 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/10/1993
3a. Date of Last Report: 08/11/1994

2. Principal Place of Business
21: 14724 Top Sergeant Ln
22: Suite, Apt. #, etc.
23: City & State: Centreville, VA
24: Zip: 22020
25: Country: USA

2a. Mailing Address
26: 14724 Top Sergeant Ln.
27: Suite, Apt. #, etc.: 6
28: City & State: Centreville, VA
29: Zip: 22020
30: Country: USA

4. FEI Number: 59-3162927 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. *This corporation has liability for intangible tax under s. 199.032, Florida Statutes* ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FRIEBIS, DANIEL S.
3890 TURTLE CREEK DRIVE
SUITE B-1
PORT ORANGE FL 32127

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and the if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	11 TITLE	DP	☐ Change ☒ Addition
NAME	KELLY, CHRISTOPHER	12 NAME	Kelly, Linda	
STREET ADDRESS	10 BREEDS HILL COURT	13 STREET ADDRESS	14724 Top Sergeant Ln.	
CITY-ST-ZIP	LITTLE ROCK AR	14 CITY-ST-ZIP	Centreville, VA 22020	
TITLE		21 TITLE	DV	☒ Change ☐ Addition
NAME		22 NAME	KELLY, CHRISTOPHER	
STREET ADDRESS		23 STREET ADDRESS	14724 TOP SERGEANT LA	
CITY-ST-ZIP		24 CITY-ST-ZIP	CENTREVILLE, VA 22020	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Christopher Kelly 7/28/95 (703) 502-3991
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

01B2675 FN