2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000055787

Entity Name: TREASURE COAST STAFFING, INC.

FILED Jul 21, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10540 S FEDERAL HWY
760 SE PORT ST. LUCIE BLVD
PORT ST LUCIE, FL 34952 US
PORT ST LUCIE, FL 34952 US

Current Mailing Address: New Mailing Address:

P O BOX 7151

PORT ST LUCIE, FL 34985 US

FEI Number: 59-3196459 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:

MCKENKIE, JAMES J
551 SE NORSEMAN DRIVE
PT. ST. LUCIE, FL 34984 US

MCKENKIE, JAMES J
12211 RIVERBEND CT
PT. ST. LUCIE, FL 34984 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: 07/21/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 MCKENZIE, JAMES J
 Name:
 MCKENZIE, JAMES J

 Address:
 551 SE NORSEMAN DRIVE
 Address:
 12211 RIVERBEND CT

 City-St-Zip:
 PT. ST. LUCIE, FL 34984
 City-St-Zip:
 PT. ST. LUCIE, FL 34984

Title: S () Delete Title: S (X) Change () Addition

 Name:
 MCKENZIE, MARIA
 Name:
 MCKENZIE, MARIA

 Address:
 551 SE NORSEMAN DRIVE
 Address:
 12211 RIVERBEND CT

 City-St-Zip:
 PORT SAINT LUCIE, FL 34984
 City-St-Zip:
 PORT SAINT LUCIE, FL 34984

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES J MCKENZIE PRES 07/21/2004