

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000009846

FILED
Mar 29, 2005
Secretary of State

Entity Name: SELECTIVE HR SOLUTIONS XII, INC.

Current Principal Place of Business:

6920 PROFESSIONAL PKWY E
SARASOTA, FL 34240 US

New Principal Place of Business:

Current Mailing Address:

40 WANTAGE AVENUE
ATT: CORPORATE LEGAL
BRANCHVILLE, NJ 07890 US

New Mailing Address:

FEI Number: 65-0462027 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 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: VP () Delete
Name: LACY, JOHN
Address: 6920 PROFESSIONAL PKWY E
City-St-Zip: SARASOTA, FL 34240

Title: S () Delete
Name: SCHUMACHER, MICHELE N
Address: 40 WANTAGE AVE
City-St-Zip: BRANCHVILLE, NJ 07890

Title: T () Delete
Name: THATCHER, DALE A
Address: 40 WANTAGE AVENUE
City-St-Zip: BRANCHVILLE, NJ 07890

Title: VP () Delete
Name: DUNCAN, JOEL
Address: 6920 PROFESSIONAL PKWY E
City-St-Zip: SARASOTA, FL 34240

Title: CEO () Delete
Name: COLEMAN, JAMES W JR
Address: 6920 PROFESSIONAL PKWY E
City-St-Zip: SARASOTA, FL 34240

Title: VP () Delete
Name: FRANKLIN, MALCOLM
Address: 40 WANTAGE AVENUE
City-St-Zip: BRANCHVILLE, NJ 07890 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CTRL (X) Change () Addition
Name: ELDER, LOUISE T CONTRLR
Address: 6920 PROFESSIONAL PARKWAY E
City-St-Zip: SARASOTA, FL 34240

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: MICHELE N. SCHUMACHER

S

03/29/2005

Electronic Signature of Signing Officer or Director

Date