

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000005340

Entity Name: ON CALL STAFFING, INC.

**FILED**  
**Mar 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

9204 ARLINGTON EXPRESSWAY  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

6817 SOUTHPOINT PARKWAY  
SUITE 404  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

P.O. BOX 551260  
JACKSONVILLE, FL 32255

**New Mailing Address:**

FEI Number: 59-3291354

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ANSBACHER & SCHNEIDER PA  
5150 BELFORT ROAD  
BLDG 100  
JACKSONVILLE, FL 32256 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

**OFFICERS AND DIRECTORS:**

Title: DPTS  
Name: ROLEWICZ, MICHAEL  
Address: 6817 SOUTHPOINT PARKWAY, SUITE 404  
City-St-Zip: JACKSONVILLE, FL 32216

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: MICHAEL ROLEWICZ

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03/29/2011

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

\_\_\_\_\_  
Date