

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000066861

FILED
Apr 30, 2008
Secretary of State

Entity Name: LF STAFFING SERVICES, INC.

Current Principal Place of Business:

11426 NORTH JOG ROAD
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

11426 NORTH JOG ROAD
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 59-1620494

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNETT, NEWTON C
11426 NORTH JOG ROAD
PALM BEACH GARDENS, FL 33418 US

Name and Address of New Registered Agent:

BURNETT, JEFFREY
11426 NORTH JOG ROAD
PALM BEACH GARDENS, FL 33418 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: JEFFREY BURNETT

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BURNETT, NEWTON C
Address: 11426 NORTH JOG ROAD
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: P,D () Delete
Name: BURNETT, JEFFREY S
Address: 11426 NORTH JOG ROAD
City-St-Zip: PALM BCH GARDENS, FL 33418

Title: S,T () Delete
Name: PHIPPS, KIMBERLY E
Address: 11426 NORTH JOG ROAD
City-St-Zip: PALM BEACH GARDENS, FL 33418

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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: KIM PHIPPS

S,T

04/30/2008

Electronic Signature of Signing Officer or Director

Date