## 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000061204

Entity Name: KFORCE INC.

**Current Principal Place of Business:** 

1150 ASSEMBLY DR STE 500

TAMPA, FL 33607

**Current Mailing Address:** 

8405 BENJAMIN ROAD

STE G

TAMPA, FL 33634 US

FEI Number: 59-3264661 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

**FILED** Apr 15, 2024

**Secretary of State** 

6004211452CC

Officer/Director Detail:

Title CHAIRMAN, DIRECTOR Title CEO, PRESIDENT, DIRECTOR

DUNKEL. DAVID L Name Name LIBERATORE, JOSEPH J Address 8405 BENJAMIN ROAD Address 8405 BENJAMIN ROAD

> STE G STE G

TAMPA FL 33634 TAMPA FL 33634 City-State-Zip: City-State-Zip:

Title CHIEF OPERATING OFFICER & Title **DIRECTOR** 

SECRETARY FURLONG, MARK Name KELLY, DAVE M Name

8405 BENJAMIN ROAD Address 8405 BENJAMIN ROAD Address

STE G STF G

City-State-Zip: TAMPA FL 33634 TAMPA FL 33634 City-State-Zip:

Title DIRECTOR Title DIRECTOR

SIMMONS JR, N JOHN Name ROSEN, ELAINE Name

8405 BENJAMIN ROAD Address Address 8405 BENJAMIN ROAD

STE G STE G

City-State-Zip: TAMPA FL 33634 City-State-Zip: TAMPA FL 33634

Title **CFO** Title CHIEF CORPORATE DEVELOPMENT

Name HACKMAN, JEFF OFFICER

Name BLACKMAN, MICHAEL 8405 BENJAMIN ROAD Address

STE G Address 8405 BENJAMIN ROAD

City-State-Zip: TAMPA FL 33634 STF G

City-State-Zip: TAMPA FL 33634

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

04/15/2024 **CFO** SIGNATURE: JEFF HACKMAN

Continues on page 2

Electronic Signature of Signing Officer/Director Detail

above, or on an attachment with all other like empowered.

Date

## Officer/Director Detail Continued:

DIRECTOR Title Title DIRECTOR DUNWOODY, ANN MEHL, RANDALL Name Name

Address 8405 BENJAMIN ROAD Address 8405 BENJAMIN ROAD STE G

STE G

City-State-Zip: TAMPA FL 33634 City-State-Zip: TAMPA FL 33634

CHIEF EXPERIENCE OFFICER Title CHIEF INFORMATION OFFICER Title

Name THOMAS, ANDREW Name EDWARDS, DENIS Address 8405 BENJAMIN ROAD Address 8405 BENJAMIN ROAD

STE G STE G

City-State-Zip: TAMPA FL 33634 TAMPA FL 33634 City-State-Zip:

Title CHIEF TRANSFORMATION OFFICER Title **DIRECTOR** 

RICH, DOUG Name CLOUDMAN, CATHERINE Name

Address 8405 BENJAMIN ROAD Address 8405 BENJAMIN ROAD

STE G STE G

TAMPA FL 33634 City-State-Zip: TAMPA FL 33634 City-State-Zip:

Title **DIRECTOR** Title **GENERAL COUNSEL** BROOKS, DERRICK SMAYDA, JENNIFER Name Name

Address Address 8405 BENJAMIN ROAD 8405 BENJAMIN ROAD

> STE G STE G

City-State-Zip: TAMPA FL 33634 City-State-Zip: TAMPA FL 33634