## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000048331

Entity Name: SCHERER STAFFING, LLC

**Current Principal Place of Business:** 

4500 140TH AVENUE NORTH

SUITE 209

CLEARWATER, FL 33762

**Current Mailing Address:** 

4500 140TH AVENUE NORTH SUITE 209

CLEARWATER, FL 33762

FEI Number: 26-0221535 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HINES, J. BRADFORD 116 SIXTH STREET SOUTH ST. PETERSBURG, FL 33701 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 23, 2013

**Secretary of State** 

CC3294597465

Authorized Person(s) Detail:

Title **MGRM** Title **MGRM** 

SCHERER, LISA L Name Name WILLIAMS, MARY

Address 4500 140TH AVENUE NORTH, SUITE Address 4500 140TH STREET NORTH, SUITE

CLEARWATER FL 33762 CLEARWATER FL 33762 City-State-Zip: City-State-Zip:

Title **MGRM** 

SCHERER, JOHN Name

Address 4500 140TH AVENUE NORTH, SUITE

CLEARWATER FL 33762 City-State-Zip:

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

04/23/2013 SIGNATURE: SCHERER, JOHN **MGRM**