

No. <b>W 26074</b>		<b>Due no later than Sep 30, 2005</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  KFORCE FLEXIBLE SOLUTIONS, LLC MICHAEL R HURLEY 1001 EAST PALM AVE TAMPA FL 33605 0000 USA		CORPORATION SERVICE COMPANY 1401 SHORELINE DR STE 2 BOISE ID 83702 0000			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	DAVE KELLY	1001 EAST PALM AVE	TAMPA	FL	33605		
MANAGER	DAVID L DUNKEL	1001 E PALM AVE	TAMPA	FL	USA	33605	
MANAGER	WILLIAM SANDERS	1001 E PALM AVE	TAMPA	FL	USA	33605	
5. Organized Under the Laws of:  <b>FLORIDA</b> <b>W 26074</b>		6. Annual Report must be signed.*  Signature: David Kelly Name (type or print): David Kelly					
		Date: 09/01/2005 Title: Manager					
Processed 09/01/2005		* Electronically provided signatures are accepted as original signatures.					