



# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

|   |                                      |   |                     |
|---|--------------------------------------|---|---------------------|
| 1. Corporate ID No.<br>139220   |                                      | 2. Name of Corporation<br>Crum Staffing, Inc. |                     |
| 3. Street Address Principal Business Office<br>100 South Missouri Avenue                                |                                      | City<br>CLEARWATER                            | State<br>FL         |
|   |                                      | Zip<br>33756                                  |                     |
| 4. Business Phone No<br>727-726-2786  | 5. State of Incorporation<br>FLORIDA |   | 6. SIC Code<br>7732 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island<br>EMPLOYEE LEASING COMPANY |                                      |   |                     |

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS

|   |             |              |   |             |              |
|---|-------------|--------------|---|-------------|--------------|
| President Name<br>Frank W. Crum, Jr.        |             |              | Vice President Name<br>Frank W. Crum, Sr.   |             |              |
| Street Address<br>100 South Missouri Avenue |             |              | Street Address<br>100 South Missouri Avenue |             |              |
| City<br>Clearwater                          | State<br>FL | Zip<br>33756 | City<br>Clearwater                          | State<br>FL | Zip<br>33756 |
| Secretary Name<br>Frank W. Crum, Sr.        |             |              | Treasurer Name<br>Frank W. Crum, Jr.        |             |              |
| Street Address<br>100 South Missouri Avenue |             |              | Street Address<br>100 South Missouri Avenue |             |              |
| City<br>Clearwater                          | State<br>FL | Zip<br>33756 | City<br>Clearwater                          | State<br>FL | Zip<br>33756 |

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS

|                |       |     |                |       |     |
|----------------|-------|-----|----------------|-------|-----|
| Director Name  |       |     | Director Name  |       |     |
| Street Address |       |     | Street Address |       |     |
| City           | State | Zip | City           | State | Zip |
| Director Name  |       |     | Director Name  |       |     |
| Street Address |       |     | Street Address |       |     |
| City           | State | Zip | City           | State | Zip |

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

| Number of Shares | Class/Series | Par Value       |
|------------------|--------------|-----------------|
| 1,100,000        | COMM         | \$.07 PAR VALUE |

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

| Number of Shares | Class/Series | Par Value |
|------------------|--------------|-----------|
| NONE             |              |           |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



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\*139220 FBC 02/01/05 12:39:31 PM\*

File Date 2-7-05

Check No. 009899

By: KTB

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] 2-3-2005  
Signature of Officer Date

FRANK W. CRUM, JR.  
Print or Type Name of Officer

PRESIDENT  
Title of Officer