

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000063694 (2)

1. Corporation Name
EMPLOYEE SERVICES OF AMERICA, INC.

Principal Place of Business
402 43RD ST W
BRADENTON FL 34209

Mailing Address
402 43RD ST W
BRADENTON FL 34209-2852

FILED

97 JUN 17 AM 9: 52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		09/13/1993		04/16/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22		27		65-0649506		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing		☐ \$5.00 May Be Added to Fees	
Zip		Zip		Trust Fund Contribution			
24		29		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		☐ Yes ☐ No	
Country		Country					
25		30					

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
81 Name		81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)		82 Street Address (P.O. Box Number is Not Acceptable)	
83		83	
84 City		84 City	
85		85	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Connie Bryan SPECIAL ASSISTANT SECRETARY DATE 6-16-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC	1.1 TITLE	V
NAME	BOYD, WILBUR H	1.2 NAME	Grad Behr
STREET ADDRESS	402 43RD ST W	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	1.4 CITY-ST-ZIP	
TITLE	DP	2.1 TITLE	V-D
NAME	LYNN, WAYNE R.	2.2 NAME	Arthur Locilento
STREET ADDRESS	402-43RD STREET WEST	2.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	S
NAME	BOYD, VALERIE	3.2 NAME	marie martino
STREET ADDRESS	402-43RD STREET WEST	3.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	3.4 CITY-ST-ZIP	
TITLE	DEVP	4.1 TITLE	All Located @
NAME	BOYD, JAMES E.	4.2 NAME	1016 W 9th Ave
STREET ADDRESS	402 43RD ST W	4.3 STREET ADDRESS	King of Prussia, PA 19406
CITY-ST-ZIP	BRADENTON FL	4.4 CITY-ST-ZIP	
TITLE	VPT	5.1 TITLE	
NAME	ROSS, BRENDA SMYTH	5.2 NAME	
STREET ADDRESS	402 43RD ST W	5.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	5.4 CITY-ST-ZIP	
TITLE	S	6.1 TITLE	
NAME	MCGUIRE, MYRT H.	6.2 NAME	
STREET ADDRESS	402-43RD STREET WEST	6.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE R. M. ... 5-397 WA 992-7458

CR2E034 (9/96)