FILED

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90280 022 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000091718

1. Corporation Name

COLLEGE PROFESSIONAL PLACEMENT, INC.

Principal Pace of Business 321 ALONA AVENUE SIE 285 SIE 245 WINTER PAIK FL 32792 US 2. Principal Place of Businages 21 28 9 Columbia Suite, Ant. 9 etc. 22 Suite, Ant. 9 etc. 23 Court by 24 Suite, Ant. 9 etc. 25 Court by 26 Court by 27 Court by 28 Suite, Ant. 9 etc. 29 Court by 29 Court by 20 Suite, Ant. 9 etc. 20 Court by 20 Suite, Ant. 9 etc. 21 Court by 21 28 9 Court by 22 Suite, Ant. 9 etc. 22 Suite, Ant. 9 etc. 23 Suite, Ant. 9 etc. 24 Suite, Ant. 9 etc. 25 Court by 26 Court by 27 Court by 28 Suite, Ant. 9 etc. 29 Suite, Ant. 9 etc. 20 Suite, Ant. 9 etc. 21 Suite, Ant. 9 etc. 22 Suite, Ant. 9 etc. 23 Suite, Ant. 9 etc. 24 Suite, Ant. 9 etc. 25 Suite, Ant. 9 etc. 26 Court by 27 Suite, Ant. 9 etc. 27 Suite, Ant. 9 etc. 28 Suite, Ant. 9 etc. 29 Suite, Ant. 9 etc. 20 Suite, Ant. 9 etc. 20 Suite, Ant. 9 etc. 20 Suite, Ant. 9 etc. 21 Suite, Ant. 9 etc. 22 Suite, Ant. 9 etc. 23 Suite, Ant. 9 etc. 24 Suite, Ant. 9 etc. 25 Suite, Ant. 9 etc. 26 Court by 27 Suite, Ant. 9 etc. 27 Suite, Ant. 9 etc. 28 Suite, Ant. 9 etc. 39 Suite, Ant. 9 etc. 30 Suite, Ant. 9 etc. 30 Suite, Ant. 9 etc. 30 Suite, Ant. 9 etc. 31 Suite, Ant. 9 etc. 31 Suite, Ant. 9 etc. 32 Suite, Ant. 9 etc. 33 Suite, Ant. 9 etc. 34 Suite, Ant. 9 etc. 35 Suite, Ant. 9 etc. 36 Suite, Ant. 9 etc. 37 Suite, Ant. 9 etc. 38 Suite, Ant. 9 etc. 39 Suite, Ant. 9 etc. 30 Suite, Ant. 9 etc. 30 Suite, Ant. 9 etc. 30 Suite, Ant. 9 etc. 31 Suite, Ant. 9 etc. 32 Suite, Ant. 9 etc. 33 Suite, Ant. 9 etc. 34 Suite, Ant. 9 etc. 35 Suite, Ant. 9 etc. 36 Suite, Ant. 9 etc. 37 Suite, Ant. 9 etc. 38 Suite, Ant. 9 etc. 39 Suite, Ant. 9 etc. 30 Suite, Ant. 9 etc. 30 Suite, Ant. 9 etc. 31 Suite, Ant. 9 etc. 32 Suite, Ant. 9 etc. 33 Suite, Ant. 9 etc. 34 Suite, Ant. 9 etc. 35 Suite, Ant. 9 etc. 36 Suite, Ant. 9 etc. 37 Suite, Ant. 9 etc. 38						<u>a (118) i i i i i i i i i i i i i i i i i i i</u>		
SIE 245 WINTER PARK FL 32792 US 2. Principal Place of Business 21 28 9	Principal P acc	e of Business	Mailing Address					
WINTER PARK FL 32782 US 2. Principal Place of Busingas 2. Principal Place of Busingas 3. Date Incorporated or Qualified 10/24/1997 4. EFI Nimber 4. Apt led For Not Applicable 4. Stute, Apt. #, etc. 2. Stute, Apt. #, etc. 2. City & State 2. Country 3. Direction of Country 4. Become and Address of Current Registered Agent 4. EFI Nimber 4. EFI Nim	2431 ALOMA A	VENUE	2431 ALOMA AVE					
US Supering Place of Busingss 2a. Mailing Address 2a. Mai	0.2 2.0				DO NOT WRITE IN THE CRACE			
2. Principal Place of Business 2. Mailing Address 3. Fill Number 10/24/1997 4. FEI Number 59-34/77685 5. Certific Net of Status Desired 59-34/77685 5. Suite, Apt. R. etc. 27 28								
2. Principal Place of Business 21 23 S Parkburg Dr. 28 8 3 Parkburg Dr. 29 59.3477685 S. Certificate of Status Desired Settle, Apt. II, etc. Status Desired Settle, Apt. II, etc. S. Certificate of Status Desired Settle, Apt. III, etc. Settle of Status Desired Settle of Status De	05		05		·			
21 22 37 POLY KOLLY DT. 28 29 POLY KOLLY DT. 28 59 3477685 Suite. Apt. #, etc.						1 0-1-45		
Sule, Apt. #, etc. Sule, Apt. #, etc. Sule, Ap	2. Principal P	~~ /; // '8	— / a` a a ∧ ' /)	W/ 7		 		
Sule, Apt. #, etc. Sule, Apt. #, etc. Sule, Ap	 _			Kourgher	<u> 59-34//685</u>			
City & State City & State City & State City & State Country St. 00 May be Added it. Fees	Suite, Apt.	#, etc.	——————————————————————————————————————		· I			
23 Dir United Fees 28 Drundo Fees 29 29 29 29 29 29 29 2					<u></u>			
Zip Country Zip Country Zip Country Zip Country R. This curporation owes the current year intengible Persor al Property Tax. Yes Zimon Ximon Yes Zimon Yes Zimon Yes Zimon Yes Zimon X	City & Stat	7	City & State	1			1	
24 3.7.2.7.2.8 25 L.S.A. 29 3.2.8.2.3 30 L.S.A. Persor al Property Tax.	23 ()1 t	ando FL 378	28 Urlando	F-L	Trust Fund Contribution		<u>.</u>	
9. Name and Address of Current Registered Agent BROWN, KEVIN L 2431 ALOMA AVE STE 245 WINTER PARK FL 32792 11. Pursuant to the provisions of Scictions 607.0502 and 607.1508, Florida Statutes, the above-named ocrporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the approximent as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the approximent as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the approximent as registered agent. I am familiar with, and a cept the ability as a collection of Story. Story agent and too of agent	Zip	Courtry	Zip	一 ・ ふ へ				
BROWN, KEVIN L 2431 ALOMA AVE STE 245 WINTER PARK FL 32792 11. Pursuent to the provisions of Sk-ctions 607.0502 and 607.1508, Florida Statules, the above-named ccrporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was nuthorized by the corporation's board of directors. I hereby accept the approintment as registered agent, and recept the obligate page and statutes. SIGNATURE Signature, hyped or primed have of registered agent and tills if applicable. (NOTE: Registered Agent: suprature registered Agent: sup	24 5			0 US/T				
BROWN, KEVIN L 2431 ALOMA AVE STE 245 WINTER PARK FL 32792 11. Pursuant to the provisions of Skictions 607.0502 and 607.1508, Florida Statutes, the above-named ocrporation submit is this statement for the purpose of changing its registered of office or registered agent, or both, in the State of Florida Schot change was authorized by the corporation's board of kilectors. I hereby accept the appointment as registered agent, and accept the above-named statutes. SIGNATUFE SIGNATUFE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS. AND DIRECTOF S IN 12 TITLE DP DELETE 1.1 TITLE DP DELETE 1.1 STREET ADDRESS CITY-ST-ZP ORLANDO FL 32828 TITLE D DELETE 1.2 NAME 1.3 STREET ADDRESS CITY-ST-ZP ORLANDO FL 32828 TITLE D DELETE 3.1 STREET ADDRESS CITY-ST-ZP ORLANDO FL 32828 TITLE D DELETE 3.1 STREET ADDRESS CITY-ST-ZP ORLANDO FL 32828 TITLE D DELETE 3.1 STREET ADDRESS CITY-ST-ZP ORLANDO FL 32828 TITLE D Change Addition Addition Change Addition Addition Change Addition Addition Change Addition Addition Addition Change Addition Addition Addition Change Addition Addition Change Addition Addition Change Addition					10. Name and Address of New Registers	d Agent		
STEET ADDRESS CITY-ST-ZIP DRIAWA 2431 ALOMA AVE STE 245 WINTER PARK FL 32792 84							i	
SIE 245 WINTER PARK FL 32792 11. Pursuent to the provisions of Sections 607.0502 and 607.1508. Florida Statules, the above-named or proration 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 approintment as registered office or registered agent, and accept the obligate pas of Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR'S IN 12 11. TITLE DP ORLANDO FL 32828 12829 PARKBURY DR. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR'S IN 12 ITILE D OBLETE 11. TITLE D OBLETE 11. TITLE D OBLETE 12. TITLE D OBLETE 13. TITLE Change Addition Addition Change Addition Change Addition Addition Addition STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32828 ORLA								
WINTER PARK FL 32792 84	2431 ALOMA AVE							
### City	STE 245			83				
11. Pursuent to the provisions of Suctions 607.0502 and 607.1508, Florida Statules, the above-named corporations butter is 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 approintment as registered agent. I am familiar with, and as cept the abbligatogues of Section 607.0505, Fivrida Statutes. SIGNATURE SIGNATU	WINTER PARK FL 32792					las Zin Codo		
11. Pursuent to the provisions of Sictions 607.0502 and 607.1508, Florida Statules, the above-named or ropration submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of clirectors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of clirectors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of clirectors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of clirectors. I hereby accept the appointment as registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of clirectors. I hereby accept the appointment as registered agent, or both in the State of Florida. Such change is statutes. SIGNATUFE SIGNATUFE SIGNATUFE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS, IND DIRECTOF. SIN 12 ITILE DP OFFICERS AND DIRECTOF. SIN 12 ITILE DP ORLANDO FL 32828 12829 PARKBURY DR. ORLANDO FL 32828 14 city.st.zip ORLANDO FL 32828	84				lando F	L 85 25 22	5	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of cirectors. I nereby accept the appointment as registered agent, and accept the obligatings of .section 607.0505. Fi-vrida Statutes. SIGNATURE Signature, speed or printed have not registered agent and title if applicable. (NOT :: Registered Agent signature registed when refinsature) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIC NNS/CHANGES TO OFFICERS. AND DIRECTORS IN 12 ITITLE DP DP DELETE 1.1 TITLE DP Addition STREET ADDRESS CITY-ST-ZIP TITLE D D DELETE 21 TITLE D Change Addition NAME BROWN, KEVIN 22 NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE DELETE 3.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE Addition Change Addition Addition Addition Addition Addition Change Addition Addition Addition AMME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.1 TITLE DELETE Addition Addition	14 Demonstrate the convisions of Sections 507 0500 and 507 1508. Elogida Statutes the above-hamed or progration submits this statement for the purpose of changing it						ered	
SIGNATUFE Signature, typed or printed fine no of registered agent and title if applicable. (NOT a Registered Agent signature regi	office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered							
Title DP	agent. l a	m familiar with, and a cept the obli	gations.of, Section 607.0505, Florid	a Statutes.	In lan			
12. OFFICERS ANI) DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS, WID DIRECTOF, SIN 12 TITLE DP	SIGNATURE	7000	Crow	7/	d when remetation) DATE		-	
TITLE					d tri dividinazione)	AND DIRECTORS IN	12	
NAME BRENNAN, ALYNDRIA 12 NAME 12829 PARKBURY DR. 13 STREET ADDRESS ORLANDO FL 32828 14 CITY-ST-ZIP Change Addition					ABBITIME OF THE			
STREET ADDRESS 12829 PARKBURY DR. 13 STREET ADDRESS 14 CITY-ST-ZIP		, - ,						
CITY-ST-ZIP		ARROS DADICBUBY DD						
TITLE D	STREET ADDRESS)	
NAME BROWN, KEVIN 22 NAME			— — — — — — — — — — — — — — — — — — —			Change D	Addition	
STREET ADDRESS 12829 PARKBURY DR. 2.3 STREET ADDRESS	TITLE	\ -	☐ DELETE			Change	100/00/1	
CITY-ST-ZIP	NAME			2.2 NAME				
TITLE 31 TITLE Change Addition NAME 32 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition	STREET ADDRESS	12829 PARKBURY DR.		2.3 STREET ADDRESS		•	ŀ	
NAME 32 NAME	CITY-ST-ZIP	ORLANDO FL 32828		2.4 CITY-ST-ZIP				
STREET ADDRESS	TITLE		☐ DELETE	3.1 TITLE		Change A	Addition	
CITY-ST-ZIP 34. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition	NAME			3.2 NAME				
TITLE DELETE 4.1 TITLE Change Addition	STREET ADDRESS			3.3 STREET ADDRESS				
TITLE DELETE 4.1 TITLE Change Addition	CITY-ST-7IP			3.4. CITY-ST-ZIP				
			☐ DELETE			Change /	Addition	
NAME 4.2 NAME	NAME			4. 2 NAME				

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I 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, with a lother like empowered.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4 4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6 1 TITLE

6.2 NAME

DELETE

☐ DELETE

SIGNATURE:

STREET ADDRE 3S

STREET ADDRE 3S

STREET ADDRE 3S

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

RE AND TYPED OR PRINTED MAME OF SIGNING OFFICES: OR DIRECTOR

☐ Change

Change

☐ Addition

Addition