

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770826

FILED
Jan 13, 2005
Secretary of State

Entity Name: WORKFORCE CONNECTION, INC.

Current Principal Place of Business:

6 C HOLLYWOOD BLVD.
FORT WALTON BEACH, FL 32548 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 3091
FT WALTON BCH, FL 32547 US

New Mailing Address:

FEI Number: 59-2326926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOUNTAIN, PEGGY
418 PRIMROSE CIRCLE
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

FOUNTAIN, PEGGY
7 SHARILYN
SHALIMAR, FL 32579 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: PEGGY FOUNTAIN

01/13/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FALLIN, BARBARA
Address: 507 POCAHONTAS DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: D () Delete
Name: APLIN, CHARLES,
Address: 120 LOWERY PL
City-St-Zip: FT. WALTON BEACH, FL

Title: D () Delete
Name: BURNS, MICHELE
Address: 4 LAGUNA STREET 101
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: ED () Delete
Name: FOUNTAIN, PEGGY
Address: 801 WHITE POINT ROAD
City-St-Zip: NICEVILLE, FL 32578

Title: D () Delete
Name: FIGUEROA, PEDRO
Address: 107 TUPELO AVE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D (X) Delete
Name: RUSS, PHIL
Address: 409 N.E. RACETRACK ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: FIGUEROA, PEDRO
Address: PO BOX 33429
City-St-Zip: PENSACOLA, FL 32508

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ED (X) Change () Addition
Name: FOUNTAIN, PEGGY
Address: 7 SHARILYN
City-St-Zip: SHALIMAR, FL 32579

Title: D (X) Change () Addition
Name: CARROLL, LESLIE
Address: 5892 JACK STOKES ROAD
City-St-Zip: BAKER, FL 32531

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PEGGY FOUNTAIN

ED

01/13/2005

Electronic Signature of Signing Officer or Director

Date