

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 # F69760

(9)

1. Corporation Name

BOYD'S EMPLOYEE SERVICES, INC.

Principal Place of Business

Mailing Address

1111-5TH ST W
PALMETTO FL 34221
US

1111-5TH ST W
PALMETTO FL 34221-4910
US

FILED
97 JUN 23 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 1016 W 9th Ave

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
03/05/1982

3a. Date of Last Report
05/01/1996

4. FEI Number

59-2170281

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

GREENE, ROBERT F.
1301 6TH AVENUE WEST, SUITE 305
BRADENTON FL 34205

CT Corporation System
1200 S Pine Island Road
Plantation FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	STD	DELETE
NAME	SMITH, CAROLYN F	
STREET ADDRESS	1111 5TH ST. W	
CITY-ST-ZIP	PALMETTO, FL 00000	
TITLE	VD	DELETE
NAME	SMITH, ROBERT G	
STREET ADDRESS	1111 5TH ST. W	
CITY-ST-ZIP	PALMETTO, FL 00000	
TITLE	PD	DELETE
NAME	SMITH, OSCAR III	
STREET ADDRESS	5520 43RD AVE E	
CITY-ST-ZIP	BRADENTON, FL 00000	
TITLE		DELETE
NAME		
STREET ADDRESS	700002221167--9	
CITY-ST-ZIP	05/24/97-01041-016	
TITLE		
NAME	*****165.00 *****165.00	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	Change	Addition
1.2 NAME	Loren Hulber		
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE	Vice President	Change	Addition
2.2 NAME	Brad Behr		
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE	Secretary	Change	Addition
3.2 NAME	marie martino		
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE	Treasurer	Change	Addition
4.2 NAME	Robert Moore		
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE	All Located @	Change	Addition
5.2 NAME	1016 W 9th Ave		
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE	King of Prussia	Change	Addition
6.2 NAME	PA 19406		
6.3 STREET ADDRESS			
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: [Signature] 5-19-97 1-10-99-7777

CR2E034 (9/96)