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

PROFIT **CORPORATION ANNUAL REPORT** 

Principal Place of Business



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1998 DOCUMENT # 1. Corporation Name

(9)

SUNSHINE STAFF LEASING, INC.

**FILED** 

Apr 06 1998 8:00am

Secretary of State

Mailing Address	s redittet derr derrie teret efter jant jant freit didit fille fiffit atert affil ibit
-5006 US 27 N	

SEBRING FL US			-5006 US 27 N SEBRING FL 33870 US			DO NOT WRITE  3. Date Incorporated or Qualified	IN THIS SPACE	<u> </u>
						11/16/1982		
2. Principal Place of Business			2a. Mailing Address		4. FEI Number		Applied For	
	US 27 Nor	th	26 5825 US2	7 North	1	59-2280930	<u> </u>	Not Applicable
Sulte, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	┌ \$8	.75 Additional
22			27			S. Certificate of Status Desired	F	ee Required
City & Star 23 Sebri		FL	City & State  28 Sebring	т	'L	Election Campaign Financing     Trust Fund Contribution		5.00 May Be
Zip		Country	Zip	Countr		This corporation owes or has particular to the second of the second	<del></del>	
24 33870		<b>Highlands</b>	29 33870	30 HIgh	•	Personal Property Tax due June	30. <b>K</b> Yes	□No
		Address of Current	Registered Agent	<u>F_</u>		10. Name and Address of New Re	jistered Agent	
1	WDLIN, FRED J	l.		81	Name			
5 <del>000 US 27 N</del> Sebring FL 88878					Street Add	dress (P.O. Box Number is Not Acceptable) US 27 North		
				83				
				84	City Sebri	ino	FL 85	Zip Code
11. Pursuant	to the provisions	of Sections 607.0502	and 607 1508, Florida Statu	ites, the abov	e-named co	rrporation submits this statement for the patients board of directors. I hereby accept		33870 ging its registered
agent. I a	am jamiliar walla, a	nd accept the obligat	ions of, Section 607.0505, F	lorida Statute	y the corpora s.	ation's board of directors. I hereby accep	t the appointme	ent as registered
SIGNATURE	MINIC	1-111111						
12.	Standare, typed or prin	OFFICERS AND		TE: Registered Ag	ent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE DIPE	0700011140
TITLE	i P	OTTIOERO AND	DELETE	1.1 Trill	····	ADDITIONS/CHANGES TO OFFIC	ENS AND DIKE	
NAME	SANDLIN, F	RED J.		1.2 NAME			<b>(E</b> ) 0/4	ange LI Addition
STREET ADDRESS	5606 US 27				T ADDRESS	5825 US 27 North		
CITY-ST-ZIP	<del>SEBRING F</del> I	_		1.4 CHTY-		Sebring, FL 33870	/	
TITLE	T	·····	☐ DELET <b>É</b>	2.1 TITLE	<i>,,</i>	23070	<b>☑</b> Chi	ange Addition
NAME	Gaines, Ro			2.2 NAME				•
STREET ADDRESS	- <b>50</b> 00 US 27			2.3 STREE	ADDRESS :	5825 US 27 North		
CITY-ST-ZIP	\$EBRING FI	<u> </u>	. /	2. 4 CITY-	ST-ZIP	Sebring, FL 33870		
TITLE	8		<b>₩</b> DELET <b>E</b>	3.1 TITLE		1	Cha	ange Addition
NAME	DEVANY, D			3.2 NAME				
STREET ADDRESS	5606 U9 27	<b>WORTH</b>		3.3 STREE	ADDRESS			
CITY-ST-ZIP	<b>BEBRING</b> FL			3.4. CITY-	ST-ZIP			
TITLE			DELETE	4.1 TITLE			Cha	ange 🗌 Addition
NAME				4. 2 NAME				
STREET ADORESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CiTY - S	ST - ZIP			
TITLE			☐ DELETE	5.1 TITLE		with a first armin after a first a series of the contract of t	Cha	ange 🔲 Addition
NAME				5.2 NAME		40000248 -04/06/980109	リニリサ 7010	
STREET ADDRESS				5.3 STREET	ADDRESS	***750.00	1013	
CITY-ST-ZIP		·-·-		5.4 CITY - 5	ST-ZIP	कक्काउध. ४४		
TITLE			☐ DELETE	6.1 TITLE			Cha	ange Addition
NAME				6.2 NAME				PΣ
STREET ADDRESS				6.3 STREET	ADDRESS			14.1
CITY-ST-ZIP				64 CITY - 9	7-210			16

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 an attachment with an address.