FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

FILED Jan 31, 1996 08:00 AM **Secretary of State**

Daytime Phone #

1996

/**/**\\

1. Corporation	Name STAFF OF FLORIDA, INC	\-/			I (STI) I SEE SIE (SIE (SIE II) SIE II)	idi: Sidil didi: Aldi: Aldi: Aldi: Bidi: Aldi: Ida	
			— 				
Principal Place of Business		Mailing Address	Mailing Address			are armer debet dibit didit Billit dibit ibbi	
3040 GULF TO BAY BLVD SUITE 110		3040 GULF TO BAY BLVD					
CLEARWATER FL 34619		SUITE 110 Clearwater FL 34	CLEARWATER FL 34619				
US		US			3. Date Incorporated or Qualified	3a. Date of Last Report	
2. Principal Place of Business		2a. Mailing Address		09/13/1983 4. FEI Number	03/10/1995		
21		26 26		59-2340076	Applied For Not Applicable		
Suite, Apt. #, etc.		Suite. Apt. #, etc.			\$8.75 Additional		
22		27		5. Certificate of Status Desired	Fee Required		
City & State		City & State	<u>├</u> ¬¬ ´		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip Country 25		Ζφ 29	Country 30		8. This corporation has liability for in Florida Statutes Yes	ntangible tax under s. 199.032,	
571	9. Name and Address of Cur	· · - · - · - · - · - · - · - ·	1301		10. Name and Address of New Re	_	
			81	Name			
	Frank W. Jr.		62	Street Addr	ess (P.O. Box Number is Not Acceptable	a)	
	JLF TO BAY BLVD			Ottoot / tour	ous processor and a market recognish	~ 	
STE 200			83				
CLEARW	/ATER FL 34619		64	City		85 Zip Code	
11 0							
SIGNATURE	n, and accept the obligations of, s	section 607.0505, Florida Statuti	9S.		ation submits this slatement for the purp d of directors. I hereby accept the appo		
	Signature, typed or printed name of registered a OFFICERS	AND DIRECTORS	NOTE Registered Agent	signature requirer	d when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTORS IN 12	
THELE	DP	DELETE	1 1 THILE		NOOMONG CHANGES TO GITTE	Change Addition	
NAME	CRUM, FRANK W. JR.		1.2 NAME			_ , _	
STREET ADDRESS 3040 GULF TO BAY BLVD,), SUITE 110	13 STREET ADDRESS				
C-1Y-\$1-702	CLEARWATER FL		14 CHY-\$1	-719			
TIFLE	DST COMMENTS OF	☐ DELETE	2 1 TITLE			Change 🔲 Addition	
NAME	CRUM, FRANK W. SR.	OUTE 440	22 NAME				
STREET ADDRESS	OLEADINATED EL		23 STHEET A			}	
CHY ST ZP	OLLAMIATER TE	DELETE	24 CHY-SI-ZIP 3 1 TITLE			Change Addition	
NAME			3.2 NAME			[] outside [] varietiti	
STREET ADDRESS			33 STREET	ADDRESS			
CHY ST ZP			3 4 CITY - ST	- ZIP			
TiffE	tt.		4 1 TITLE			Change Addition	
NAME			4 2 NAME				
STREET ADDRESS			43 STREET A				
C 1Y-\$1-7# 1-ILF			4.4 CITY - ST	- ZIP		Change CT Addit	
NAME	☐ DELETE		5 1 THTLE			Change Addition	
STRE: LADDRESS			5.2 NAME 5.3 STREET A	MUDDERSO			
Cly-SI-ZP			5.4 CITY - ST				
THEF	The second		6 I TITLE			Change Addition	
NAME			6.2 NAME			-	
STREET ACCURESS			63 STREET A	ADDRESS		,	
CITY:ST-ZP		./4	64 CITY - ST				
14. I do hereby certify that	y certify that the information supplied the information indicated on this	ied with this filing is voluntarily fu	rnished and does	not qualify for	or the exemption stated in Section 119.0 te and that my signature shall have the	17(3)(k), Florida Statutes. I further	

oath; that I am an officer or director of appears in Block 12 or Block 13 if the orporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name 1, or on an attachment with an address.

SIGNATURE:

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR