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

1996

DOCUMENT #

N.C-12-7-95

-AMERICAN STAFF LEASING CORPORATION -

Amstaff Human Resources, Inc. I Principal Place of Business Mailing Address 6723 PLANTATION RD. PO BOX 15698 -PO-BOX-15090 -PO BOX 15698 PENSACOLA FL 32504 PENSACOLA FL 32514 3a. Date of Last Report 3. Date Incorporated or Qualified 11/04/1983 01/26/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2345956 26 Not Applicable 21 Suite, Apt. #, etc. \$8,75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Ζφ Zip Country 8. This corporation has liability for intangible tax under s 199.032, ☐ Yes ☐ No Florida Statutes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) Landrum, H. Britt 82 -6708 PLANTATION ROAD 83 PENSACOLA FL 32504 Zip Code 84 City 85 rovisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office int, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am accept the obligations of, Section 617.0505, Florida Statutes. DĀTE SIGNATURE e, a jed and the dappear ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 DELETE 1 1 TITLE TITLE NAME LANDRUM, H. BRITT 1.2 NAME **9700 PLANTATION ROAD** 1.3 STREET ADDRESS STREET ADORESS 32504 PENSACOLA FL CITY-ST-ZIP 14 CITY - ST - ZIP DELETE Change Addition TITLE 2 1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-SI-ZIP 2 4 CHY - ST- ZIP DELETE Addition 3 1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4 CITY - ST-ZIP CITY-ST-ZIP DELETE Addition 4 1 HILE TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CHTY - ST - ZIP 4 4 CITY - ST - ZIP DELETE ☐ Change Addition TITLE 5 LTILLS 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS 6.4 CITY - \$1 - ZIP

6 1 T:TLE

6.2 NAME

SIGNATURE:

CITY - ST - ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

DELETE

(904) 477-7022 Daytine Phone #

500001774745® -04/10/96--01011--003

***400.00

CR2E034 (12/95)