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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

K96736

(9)

HEAD HUNTERS OF NASSAU, INC.

FILED
Jan 28 1998 8:00am
Secretary of State

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							B(B)		
Principal Place of Business		Mailing Address	Mailing Address			r chataire ann enred Mille 2000f. Linia Belle Miffel Miffel	41911 41911 41911 91911 1991		
% Paula M. Carter 1262 Nassauville RD Fernandina Beach Fl 32034 US		1296 NASSAUVILLE RD. FERNANDINA BEACH FL 32304				DO NOT WRITE IN THIS S	SPACE		
						3. Date Incorporated or Qualified			
	·					06/20/1989			
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address			4. FEI Number	Applied For		
21		26				59-2936512	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Addition Fee Require			
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip 24	Country 25	Zip .	. Count			8. This corporation owes or has paid the curr Personal Property Tax due June 30.	rent year Intangible Yes		
9. Name and Address of Current Registered Agent				T		10. Name and Address of New Registered	Agent		
CARTER, PAULA M.				81	Name				
FERNANDINA BEACH FL 32034-9720			82						
				83					
				84	City		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, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

		,,					
SIGNATURE	Signature, typed or printed name of registered agent and till	s d poetwolde (b)(11)	- Bhoistarad Agant signst up angui	red when reinstating) DATE			
12.	OFFICERS AND DIRE		13.				
TITLE	VDT	DELETE	1.1 THILE		☐ Change	Addition	
NAME	CARTER, PAULA M.		1.2 NAME				
STREET ADDRESS	1296 NASSAUVILLE RD		1.3 STREET ADDRESS				
CITY-ST-ZIP	FERNANDINA BEACH FL		1.4 CITY - ST - ZIP				
TITLE	P	DELETE	2.1 TITLE		Change	Addition Addition	
NAME	GEORGE, KIMBERLY JOAN		2 2 NAME				
STREET ADDRESS	1296 NASSAUVILLE, ROAD		23 STREET ADDRESS				
CITY-ST-ZIP	FERNANDINA BEACH FL		2. 4 CITY - ST - ZIP				
TITLE		DEL et e	3.1 TITLE		Change	Additio	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4 CITY-ST-ZIP				
TITLE		☐ DELÉTE	4.1 TITLE		☐ Change	Addition Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY - ST - ZIP				
TITLE		DELETE	5.1 TITLE		☐ Change	Additio	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			54 CITY-SI-ZIP				
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Additio	
NAME		•	6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY+ST-ZIP			6.4 CITY-ST-ZIP				

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 on an attachment with an address.

1/1/08/04/04/1/1/29