

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

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95 JUN -3 AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # **L01827 (9)**

1. Corporation Name
ROMAC INTERNATIONAL OF TEXAS, INC.

Principal Place of Business: **C/O DAVID L. DUNKEL, 120 W. HYDE PARK PLACE, SUITE 210, TAMPA FL 33606, US**

Mailing Address: **C/O DAVID L. DUNKEL, 120 W. HYDE PARK PLACE, SUITE 210, TAMPA FL 33606, US**

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields.

3. Date incorporated or Qualified: **07/13/1989**

3a. Date of Last Report: **08/15/1995**

4. FEI Number: **59-2938861**

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

9. Name and Address of Current Registered Agent

**DUNKEL, DAVID L.
120 W HYDE PARK PLACE
SUITE 210
TAMPA FL 33606**

10. Name and Address of New Registered Agent (81-85)

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	CP	<input type="checkbox"/> DELETE
NAME	DUNKEL, DAVID L.	
STREET ADDRESS	120 W. HYDE PARK PLACE, #210	
CITY - ST - ZIP	TAMPA FL	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	SUTTER, HOWARD W.	
STREET ADDRESS	5900 N ANDREWS AVE #826	
CITY - ST - ZIP	FT. LAUDERDALE FL	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	COCCHIARO, RICHARD M.	
STREET ADDRESS	20 N ANDREWS AVE #1465	
CITY - ST - ZIP	CHICAGO IL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	DOMINICI, PETER	
STREET ADDRESS	120 W HYDE PARK PL. #210	
CITY - ST - ZIP	TAMPA FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY - ST - ZIP	
5. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	Sutter, Howard W.
7. STREET ADDRESS	500 W. Cypress Creek Road Ste. 200
8. CITY - ST - ZIP	Ft. Lauderdale, FL 33309
9. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	Cocchiaro, Richard M.
11. STREET ADDRESS	20 N. Wacker Dr. Ste. 1360
12. CITY - ST - ZIP	Chicago, IL 60606
13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY - ST - ZIP	
17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. NAME	
19. STREET ADDRESS	
20. CITY - ST - ZIP	

14. I 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 included 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, on an attachment with an address.

SIGNATURE: *David L. Dunkel* David L. Dunkel 5/30/96 819-258-8888

CR2E034 (12/95)