2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005812

FILED Apr 26, 2012 Secretary of State

Entity Name: EMPLOYMENT CONNECTIONS OF JACKSONVILLE, INC.

Current Principal Place of Business: New Principal Place of Business:

3655 PINE STREET JACKSONVILLE, FL 32205

Current Mailing Address: New Mailing Address:

3655 PINE STREET JACKSONVILLE, FL 32205

FEI Number: 20-4959241 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MAXWELL, SARA J 3655 PINE STREET

JACKSONVILLE, FL 32205 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: C

 Name:
 MAXWELL, HARRY O

 Address:
 3655 PINE STREET

 City-St-Zip:
 JACKSONVILLE, FL 32205

Title: D

 Name:
 MAXWELL, SARA J

 Address:
 3655 PINE STREET

 City-St-Zip:
 JACKSONVILLE, FL 32205

Title: O

 Name:
 KING, ALLISON H

 Address:
 3111 OAK STREET

 City-St-Zip:
 JACKSONVILLE, FL 32205

Title: O

Name: HURDLE, WILLIAM A
Address: 1762 SINGING BIRD LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: C

Name: KING, WILLIAM A

Address: 8840 ARBOR BREEZE LANE City-St-Zip: JACKSONVILLE, FL 32222

Title: C

Name: BREWER, TIMOTHY
Address: 2020 VELA NORTE CIRCLE
City-St-Zip: ATLANTIC BEACH, FL 32233

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HARRY O. MAXWELL O 04/26/2012