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FILED

Jan 27 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N21771 (3)

1. Corporation Name

PROFESSIONAL EMPLOYMENT NETWORK, INC.

Principal Place of Business

Mailing Address

1001 EXECUTIVE CTR DR
ORLANDO FL 32803
US1001 EXECUTIVE CTR. DR.
ORLANDO FL 32803-3520
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30

3. Date Incorporated or Qualified

07/29/1987

3a. Date of Last Report

02/05/1996

4. FEI Number

59-2863560

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LITTLE, RICHARD
4525 WOODLOT COURT
STE 139
ORLANDO FL 32835

81 Name

RANDELL CARSON

82 Street Address (P.O. Box Number is Not Acceptable)

161 West Silver Star Rd

83

Ocoee, FL

84 City

34761

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

*Randy Carson**Randell Carson*

1-15-97

Signature, type or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ~~XX~~ DELETE
NAME LEGGORE, RUTH
STREET ADDRESS 2206 MITCH CT. WEST
CITY-ST-ZIP SANFORD FL1.1 TITLE ☐ Change ☒ Addition
12 NAME PD
13 STREET ADDRESS LARRY TUTTLE
14 CITY-ST-ZIP 501 Wilmington Circle
Oviedo, FL 32765-6982 ☐ Change ☐ AdditionTITLE VD ☐ DELETE
NAME CARSON, RANDELL
STREET ADDRESS 161 W. SILVER STAR ROAD
CITY-ST-ZIP OCOEE FL2.1 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE SD ☒ DELETE
NAME MORGAN, ALAN
STREET ADDRESS 806 RAVENS CIRCLE #305
CITY-ST-ZIP ALTAMONTE SPRINGS FL3.1 TITLE ☐ Change ☒ Addition
32 NAME SD
33 STREET ADDRESS CHET KAGEL
34 CITY-ST-ZIP 8131 Sand Lake Shores Dr
Orlando, FL 32836 ☐ Change ☐ AdditionTITLE D ☐ DELETE
NAME ROWE, ELIZABETH
STREET ADDRESS 1001 EXECUTIVE CENTER DRIVE
CITY-ST-ZIP ORLANDO FL4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME MAUGHLAN, CHERYL
STREET ADDRESS 105 LIVE OAKS GARDENS
CITY-ST-ZIP CASSELBERRY FL5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE D ☒ DELETE
NAME LITTLE, RICHARD
STREET ADDRESS 4525 WOODLOT COURT
CITY-ST-ZIP ORLANDO FL6.1 TITLE ☐ Change ☒ Addition
6.2 NAME D
6.3 STREET ADDRESS MICHAEL SCHWEIZER
6.4 CITY-ST-ZIP 643 Wheeling Ave.
Altamonte Springs, FL 32714 ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

E. Rowe *Elizabeth Rowe*

1/15/97

407 8972886

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0016342

CR2E037 (9/96)