

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**CORPORATION
ANNUAL REPORT
1995**FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS**APPROVED
AND
FILED**

95 APR 27 PM 12:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**DOCUMENT # N42755 (1)**

1. Corporation Name

PERSONNEL TESTING COUNCIL - SOUTH FLORIDA, INC.

Principal Place of Business

Mailing Address

3500 WASHINGTON ST
HOLLYWOOD FL 33021MIKE CHASIN
3500 WASHINGTON ST
HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/28/19913a. Date of Last Report
08/10/19944. FEI Number
65-0258964Applied For
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 2601 WEST BROWARD BLVD.**2b 2601 WEST BROWARD BLVD**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 RM 1050**27 RM 1050**

City & State

City & State

23 FT. LAUDERDALE, FL**2b FT. LAUDERDALE, FL**

Zip

Country

Zip

Country

24 33312**25 USA****29 33312****30 USA**

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**6. Election Campaign Financing
Trust Fund Contribution☐ **\$5.00 May Be
Added to Fees**7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status☒ **\$68.75 Supplemental
Fee Not Required**8. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILLIS, LINSEY C.
301 CLUB CIRCLE #105
BOCA RATON FL 3348781 Name **BARUNHART, CAROLE**
82 Street Address (P.O. Box Number is Not Acceptable)
2601 WEST BROWARD BLVD.
83 **RM 2004**
84 City **FT. LAUDERDALE, FL** 85 Zip Code **33312**

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	WILLIS, LINSEY C.
STREET ADDRESS	3111 S. DIXIE HWY #120
CITY - ST - ZIP	WEST PALM BEACH FL
TITLE	D
NAME	CHASIN, MIKE
STREET ADDRESS	3500 WASHINGTON ST
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	D
NAME	SLAGLE, LISA
STREET ADDRESS	1534 NE 16TH TERR
CITY - ST - ZIP	FT LAUDERDALE FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	D	☒ Change ☐ Addition
1.2 NAME	BARUNHART, CAROLE	
1.3 STREET ADDRESS	2601 WEST BROWARD BLVD	
1.4 CITY - ST - ZIP	FT. LAUDER DALE, FL 33312	
2.1 TITLE	D	☒ Change ☐ Addition
2.2 NAME	CHASIN, MIKE	
2.3 STREET ADDRESS	115 S. ANDREWS AVE. GOVT. CENTER	
2.4 CITY - ST - ZIP	FT. LAUDERDALE, FL 33301	
3.1 TITLE	D	☒ Change ☐ Addition
3.2 NAME	SLAGLE, LISA	
3.3 STREET ADDRESS	301 N. ANDREWS AVE.	
3.4 CITY - ST - ZIP	FT. LAUDERDALE, FL 33301	
4.1 TITLE	D	☐ Change ☒ Addition
4.2 NAME	ALAN, MARK	
4.3 STREET ADDRESS	2601 WEST BROWARD BLVD	
4.4 CITY - ST - ZIP	FT. LAUDERDALE, FL 33312	
5.1 TITLE	D	☐ Change ☒ Addition
5.2 NAME	BICE, DESIAEE	
5.3 STREET ADDRESS	301 N. ANDREWS AVE	
5.4 CITY - ST - ZIP	FT. LAUDERDALE, FL 33301	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 110.07(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-95

305-831-8188