

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N42755 (1)
1. Corporation Name
PERSONNEL TESTING COUNCIL - SOUTH FLORIDA, INC.



Principal Place of Business
**2601 W BROWARD BLVD
RM 1050
FT LAUDERDALE, FL 33312
US**

Mailing Address
**2601 W BROWARD BLVD
RM 1050
FT LAUDERDALE FL 33312
US**

3. Date Incorporated or Qualified
03/28/1991

3a. Date of Last Report
04/27/1995

4. FEI Number
65-0258964

Applied For
☐ Not Applicable

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

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
25 Suite, Apt. #, etc.
26 City & State
27 Zip
28 Country

9. Name and Address of Current Registered Agent

**BARNHART, CAROLE
2601 W BROWARD BLVD
RM 2004
FT LAUDERDALE FL 33312**

10. Name and Address of New Registered Agent

81 Name
CHASIN, MIKE

82 Street Address (P.O. Box Number is Not Acceptable)
115 S. ANDREWS AVE GOVT CENTER

83 City
FT. LAUDERDALE

84 State
FL

85 Zip Code
33301

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

(NOTE: Registered Agent signature required when reinstating)

DATE **4/26/96**

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	BARNHART, CAROLE	2601 W BROWARD BLVD	FT LAUDERDALE FL	<input checked="" type="checkbox"/>
D	CHASIN, MIKE	115 S ANDREWS AVE GOVT CENTER	FT LAUDERDALE FL	<input type="checkbox"/>
D	SLAGLE, LISA	301 N ANDREWS AVE	FT LAUDERDALE FL	<input checked="" type="checkbox"/>
D	ALAN, MARK	2601 W BROWARD BLVD	FT LAUDERDALE FL	<input type="checkbox"/>
D	BICE, DESIREE	301 N ANDREWS AVE	FT LAUDERDALE FL	<input type="checkbox"/>
D				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
D	FERRELL, KARAN	2601 W BROWARD BLVD	FT LAUDERDALE FL 33312	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	HUDSON, EL PASNIER	2601 W BROWARD BLVD	FT LAUDERDALE FL 33312	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	VISCARRA, DIANA	2601 W BROWARD BLVD	FT. LAUDERDALE FL 33312	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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 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: *Michael Ch...* DATE **4/26/96** (954) 357-6434
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)