

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49429

FILED
Jan 05, 2012
Secretary of State

Entity Name: CONNECTIONS JOB DEVELOPMENT CORP.

Current Principal Place of Business:

5841 MAIN STREET
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

Current Mailing Address:

PO BOX 1260
NEW PORT RICHEY, FL 346561260 US

New Mailing Address:

FEI Number: 59-3131690

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAUTNER, SHEILA
5841 MAIN ST.
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

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: PD
Name: ISALY, CHRISTIAN
Address: 5841 MAIN ST.
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: MD
Name: KRAUTNER, SHEILA
Address: 5841 MAIN ST
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D
Name: CASANOVA, GINO
Address: 5841 MAIN ST.
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: TD
Name: LUCADANO, LIZADIA
Address: 5841 MAIN ST.
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: SD
Name: ASHLEY, DEBORAH
Address: 5841 MAIN ST.
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: D
Name: ASHOK, VISUVASAM
Address: 5841 MAIN ST.
City-St-Zip: NEW PORT RICHEY, FL 34652

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: SHEILA KRAUTNER

MRS

01/05/2012

Electronic Signature of Signing Officer or Director

Date