

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000001136

**FILED**  
**Sep 09, 2004**  
**Secretary of State****Entity Name:** WORKFORCE DEVELOPMENT PARTNERSHIP, INC.**Current Principal Place of Business:**4508 SW 160 AVE., STE 717  
MIRAMAR, FL 33027**New Principal Place of Business:**P.O. BOX 547206  
SURFSIDE, FL 33154 US**Current Mailing Address:**4508 SW 160 AVE., STE 717  
MIRAMAR, FL 33027**New Mailing Address:**P.O. BOX 547206  
SURFSIDE, FL 33154 US**FEI Number:** 65-0898706**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**GRIFFIN, DEAN  
4508 SW 160 AVENUE  
STE. 717  
MIRAMAR, FL 33027 US**Name and Address of New Registered Agent:**GRIFFIN, DEAN  
9801 COLLINS AVENUE  
STE. 14 P  
BAL HARBOUR, FL 33154 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: DEAN GRIFFIN

09/09/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PCEO ( ) Delete  
Name: GRIFFIN, DEAN  
Address: 4508 SW 160 AVE. SUITE 717  
City-St-Zip: MIRAMAR, FL 33027

Title: SD ( ) Delete  
Name: MOHR, ALESSANDRA  
Address: 1180 SW 159TH TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33027

Title: D ( ) Delete  
Name: CASTILLO, KELLY  
Address: 6413 WILLOW WOOD LANE  
City-St-Zip: ALEXANDRIA, VA 22310

Title: D ( ) Delete  
Name: SHUBERT, LORI  
Address: 7133 DALHOUSE ST  
City-St-Zip: SPRINGFIELD, VA 22151

Title: D ( ) Delete  
Name: TAYLOR, MICHAEL  
Address: 1480 NE 10 STREET  
City-St-Zip: HOMESTEAD, FL 33030 FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PCEO (X) Change ( ) Addition  
Name: GRIFFIN, DEAN  
Address: 9801 COLLINS AVENUE, SUITE 14 P  
City-St-Zip: BAL HARBOUR, FL 33154 US

Title: SD (X) Change ( ) Addition  
Name: MARK, GRIFFIN  
Address: 9801 COLLINS AVENUE, SUITE 14 P  
City-St-Zip: BAL HARBOUR, FL 33154 US

Title: D (X) Change ( ) Addition  
Name: CASTILLO, KELLY  
Address: 413 WILLOW LANE  
City-St-Zip: SPRINGFIELD, VA 22151

Title: D (X) Change ( ) Addition  
Name: SHUBERT, LORI  
Address: 713 DAL ST  
City-St-Zip: ALEXANDRIA,, VA 22310

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DEAN GRIFFIN

PRES

09/09/2004

Electronic Signature of Signing Officer or Director

Date