

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005902

FILED
Feb 12, 2007
Secretary of State

Entity Name: THE JOBS PARTNERSHP OF FLORIDA, INC.

Current Principal Place of Business:

7531 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32809 US

New Principal Place of Business:

Current Mailing Address:

7531 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32809 US

New Mailing Address:

FEI Number: 59-3612893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STANAKIS, MARC C
7531 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32809 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: D () Delete
Name: HUNTER, JOEL
Address: 7531 SOUTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32809

Title: T/D () Delete
Name: RAHILL, PAUL
Address: 7531 SOUTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32809

Title: P () Delete
Name: STANAKIS, MARC
Address: 7531 SOUTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32809

Title: S/D () Delete
Name: MOYA, JOSE T
Address: 7531 SOUTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32809

Title: V/C () Delete
Name: ROBINSON, SYLVESTER
Address: 7531 SOUTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32809

Title: D () Delete
Name: ALEXANDER, SCOTT
Address: 7531 SOUTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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 Chapter 119, 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: MARC C STANAKIS

P

02/12/2007

Electronic Signature of Signing Officer or Director

Date