2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State
04-21-2003 90376 014 ***158.75

DOCUMENT # P00000106228

1. Entity Name
TALENTKEEPERS, INC.

Principal Place of Business	Mailing Address
2400 MAITLAND CT PKWY SUITE 225 MAITLAND FL 32751	2400 MAITLAND CT PKWY SUITE 225 MAITLAND FL 32751

2. Principal Place of Business	3. Mailing Address
850 Concourse Pkwy S.	850 Concourse Pkwy S.
Suite, Apt. #, etc.: Suite 210	Suite, Apt. #, etc.: Suite 210
City & State: Maitland FL	City & State: Maitland FL
Zip: 32751 Country: Orange	Zip: 32751 Country: Orange

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3700800 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KG&L SERVICES, INC.
390 N ORANGE AVE, STE 600
ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name: Fredric D. Frank
Street Address (P.O. Box Number is Not Acceptable): 12 Trilby Branch
City: Longwood FL Zip Code: 32779

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Fredric D. Frank 4/15/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P FINNEGAN, RICHARD P 7420 CYPRESS GROVE ROAD ORLANDO FL 32819	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO FRANK, FREDRIC D 12 TRILBY BRANCH LONGWOOD FL 32779	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	COO MULLIGAN, CHRISTOPHER P 610 SPRING VALLEY ROAD ALTAMONTE SPRINGS FL 32714	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 4-16-03 407-660-6041
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/02)