

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 29, 2005 8:00 am
Secretary of State

08-29-2005 90145 023 ***150.00

DOCUMENT # P04000023013

1. Entity Name
ROMAC SERVICES INC.



Principal Place of Business
1314 SW 13TH STREET
CAPE CORAL, FL 33991

Mailing Address
1925 SE 26th Terr
Cape Coral, FL 33904

50063847



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

06012005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

61-1464425

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCLANEY, RONALD L
1314 SW 13TH STREET
CAPE CORAL, FL 33991

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Ronald L. McLaney

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
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
MCLANEY, RONALD L
1314 SW 13TH STREET
CAPE CORAL, FL 33991

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
McLaney, Ronald L
1925 SE 26th Terr
Cape Coral, FL 33904

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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☐ Change ☐ Addition

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☐ Delete

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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:

Ronald L. McLaney

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #