

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90128 038 ***150.00

PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P27501

1. Corporation Name
VINNELL CORPORATION OF DELAWARE



Principal Place of Business 12150 E MONUMENT DR SUITE 800 FAIRFAX VA 22033-4053 US	Mailing Address 12150 E. MONUMENT DRIVE SUITE 800 FAIRFAX VI 22033-4053 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1900 Richmond Rd. Suite, Apt. #, etc. 22 2N City & State 23 Cleveland, OH Zip 24 44124 Country 25 USA	2a. Mailing Address 26 1900 Richmond Rd. Suite, Apt. #, etc. 27 2N City & State 28 Cleveland, OH Zip 29 44124 Country 30 USA
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3. Date Incorporated or Qualified 12/29/1989	4. FEI Number 95-1473529	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	WOODLE, ROY V	
STREET ADDRESS	12150 E. MONUMENT DR, SUITE 800	
CITY-ST-ZIP	FAIRFAX VA	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	BROCCO, JAMES M.	
STREET ADDRESS	12150 E. MONUMENT DR. SUITE 800	
CITY-ST-ZIP	FAIRFAX VA	
TITLE	S	<input type="checkbox"/> DELETE
NAME	O'MELIA, KEVIN M.	
STREET ADDRESS	12150 E. MONUMENT DR, SUITE 800	
CITY-ST-ZIP	FAIRFAX VA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ODEEN, PHILIP A	
STREET ADDRESS	12150 E MONUMENT DR, STE 800	
CITY-ST-ZIP	FAIRFAX VA 22033	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

SEE SCHEDULE ATTACHED

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **Thomas Fintel** Date: **04/22/99** Daytime Phone #: **(216)291-7719**

CR2E034 (11/98)

VINNELL CORPORATION

P27501
53220 9012838

DIRECTORS

Philip A. Odeen	12011 Sunset Hills Rd. Reston, Virginia 20190
A. Thomas Fintel	12150 East Monument Dr. #800 Fairfax, VA 22033
Marsha A. Klontz	12011 Sunset Hills Rd. Reston, Virginia 20190

OFFICERS

Roy V. Woodle	Chairman/President & CEO	12150 East Monument Dr. #800 Fairfax, VA 22033-4053
Philip A. Odeen	Vice Chairman	12011 Sunset Hills Rd. Reston, Virginia 20190
James M. Brocco	Sr. Vice President and Treasurer/Chief Financial Officer	12150 East Monument Dr. #800 Fairfax, VA 22033-4053
Thomas A. Fintel	Sr. Vice President Operations	12150 East Monument Dr. #800 Fairfax, VA 22033
Charles L. Ervin	Vice President-Program Development	12150 East Monument Dr. #800 Fairfax, VA 22033
Charles D. Jones	Vice President-Job Corps	12150 East Monument Dr. #800 Fairfax, VA 22033
Edward P. Shedlick	Vice President-Contract Management	12150 East Monument Dr. #800 Fairfax, VA 22033
William L. Cobb	Vice President-Human Resources	12150 East Monument Dr. #800 Fairfax, VA 22033
Kevin M. O'Melia	Asst. Vice President and <i>Corporate Secretary</i>	12150 East Monument Dr. #800 Fairfax, VA 22033

as of 02/03/99