

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 31, 2004 8:00 am
Secretary of State

08-31-2004 90003 037 ***150.00

DOCUMENT # P93000033643

1. Entity Name
LABOR FINDERS OF THE TREASURE COAST, INC.



Principal Place of Business
P.O. BOX 7445
PORT ST. LUCIE, FL 34985

Mailing Address
P.O. BOX 7445
PORT ST. LUCIE, FL 34985

54071013



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07212004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
59-3180720

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

MCKENZIE, JAMES J
551 SE NORSEMAN DRIVE
PORT ST. LUCIE, FL 34984

7. Name and Address of New Registered Agent

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

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 8, 2004

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 PD ☐ Delete
NAME MCKENZIE, JAMES J
STREET ADDRESS 551 SE NORSEMAN DRIVE
CITY-ST-ZIP PT. ST. LUCIE, FL 34984

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 12211 Riverbend Ct.
CITY-ST-ZIP Port St. Lucie FL 34984

TITLE VP ☒ Delete
NAME MIRKOVICH, GLEN
STREET ADDRESS 701 N. INDIAN RIVER DRIVE APT. 1
CITY-ST-ZIP FORT PIERCE, FL 34950

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ST ☐ Delete
NAME MCKENZIE, MARLA T
STREET ADDRESS 551 SE NORSEMAN DRIVE
CITY-ST-ZIP PT. ST. LUCIE, FL 34984

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 12211 Riverbend Ct.
CITY-ST-ZIP Port St. Lucie FL 34984

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #