FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
Apr 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000030518 (2)**

1. Corporation Name
POWERSTAFF CORPORATION

Principal Place of Business	Mailing Address
5890 SOUTH SEMORAN BLVD ORLANDO FL 32822 US	5890 SOUTH SEMORAN BLVD ORLANDO FL 32822-4817 US

3. Date Incorporated or Qualified: 04/18/1994
3a. Date of Last Report: 04/16/1996

2. Principal Place of Business	2a. Mailing Address
21 111 2nd Ave NE	26 111 2nd Ave NE
Suite, Apt. #, etc. 22 Suite 1501	Suite, Apt. #, etc. 27 Suite 1501
City & State 23 ST. Petersbueg FL	City & State 28 ST Petersburg FL
Zip / Country 24 33701 / 25 US	Zip / Country 29 33701 / 30 USA

4. FEI Number: 59-3248167 ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FISKE, NEAL E.
5890 S. SEMORAN BLVD
ORLANDO FL 32822

10. Name and Address of New Registered Agent

81 Name: Neal Fiske
82 Street Address (P.O. Box Number is Not Acceptable): 111 2nd Ave NE Suite 1501
83
84 City: St. Petersburg FL 85 Zip Code: 33701

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CEO	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	ROSS, HAROLD		1.2 NAME		
STREET ADDRESS	400 N. ASHLEY DE, STE. 2700		1.3 STREET ADDRESS	18216 CLEAR LAKE DRIVE	
CITY-ST-ZIP	TAMPA FL		1.4 CITY-ST-ZIP	LUTZ, FLORIDA 33549	
TITLE	CO	☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	CRIPPEN, ROY		2.2 NAME		
STREET ADDRESS	400 N. ASHLEY DR. STE 2700		2.3 STREET ADDRESS	113 2ND STREET N WEST	
CITY-ST-ZIP	TAMPA FL		2.4 CITY-ST-ZIP	RUSKIN, FLORIDA 33570	
TITLE	P	☐ DELETE	3.1 TITLE		☒ Change ☐ Addition
NAME	FISKE, NEAL E.		3.2 NAME		
STREET ADDRESS	5890 S. SEMORAN BLVD.		3.3 STREET ADDRESS	6311 PASADENA POINT BLVD	
CITY-ST-ZIP	ORLANDO FL		3.4 CITY-ST-ZIP	GULFPOINT, FLORIDA 33707	
TITLE	S	☐ DELETE	4.1 TITLE		☒ Change ☐ Addition
NAME	FRATELLO, MARC J		4.2 NAME		
STREET ADDRESS	400 N. ASHLEY DR. STE 2700		4.3 STREET ADDRESS	820 COLUMBUS DRIVE	
CITY-ST-ZIP	TAMPA FL		4.4 CITY-ST-ZIP	TIERRE VERDE, FLORIDA 33715	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE	600002154546 -04/25/97--01007--015 ***165.00	☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do 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 on an attachment with an address.

SIGNATURE: [signature] NEAL FISKE — 04/10/97 — 813/822-1559
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0004088