SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000061204 (1)

ROMAC INTERNATIONAL, INC.

FILED Jul 09 1998 8:00am Secretary of State



Filhopai Flao	e or caremers	Mailing A	Mailing Address				
120 W. HYDE F	PARK PL., SUITE 150	120 W. HYDE PARK PL., SUITE 150 TAMPA FL 33606					
							DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
							08/18/1994
2. Principal P	lace of Business	ailing Address				4. FEI Number Applied For	
21		26					59-3264661 Not Applicable
Suite, Apt.	#, etc.	Suite	Suite, Apt. #, etc.				S8 75 Additional
22		27	27				5. Certificate of Status Desired Fee Required
City & State	9		City & State				6. Election Campaign Financing \$5.00 May Be
23	•	·	28				Trust Fund Contribution Added to Fees
Zip	Zip Country		Zip Cou				This corporation owes or has paid the current year Intangible
24	25	29		30	,		Personal Property Tax due June 30. X Yes No
	9. Name and Address of Current		Agent	[30]			10. Name and Address of New Registered Agent
DI ILI		Negistered	Agoin		B1	Name	(o. Italile allo Address of New Kegisteled Agent
	KEL, DAVID L				1	Hamo	
120 W. HYDE PARK PL., SUITE 150					B2	Street	Address (P.O. Box Number is Not Acceptable)
TAMPA FL 33606				_	_		30 0002583 <u>9</u> 33
				1	83		-07/03/9801018049
				l-	84	City	***550.00 85 Zip Code
				ļ°	74	City	FI_ 85 Zip Code
11. Pursuant	to the provisions of sections 607,0502	and 607 150	8 Florida Statute	s the above	L	named co	orporation submits this statement for the purpose of changing its registered
office or	regis tered agent, or both, in the State (of Florida. Su	ch change was a	uthorized	by 1	the corpo	oration'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							
Signature, typed or printed name of registered egent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OF							
12.		DIRECTOR		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D DIMMEN DAVID I		DELETE	1.1 TITLI		1	Change ☐ Addition
NAME	DUNKEL, DAVID L			1.2 NAM			DUNKEL DONO L. 120 W. HYDE PARK PLACE, SUITE 150
STREET ADDRESS	120 W. HYDE PARK PL., SUITE	150		1.3 STRE	ET#		
CITY-ST-ZIP	TAMPA FL 33606			1.4 CITY	·ST-Z	ZIP	TAMPA, FL 33606
TITLE	D		DELETE	2 1 TITL	E		S Change Addition
NAME	RORECH, MAUREEN L			2.2 NAM	E	1	TOM CALCATERRA
STREET ADDRESS	120 W. HYDE PARK PL., SUITE	150		2.3 STRE	FT A	ADDRESS	120 W. HYDE PARK PLANE, SUITE ISD
CITY-ST-ZIP	TAMPA FL 33606			2.4 CITY			TAMPA & 33606
TITLE	DTV		DELETE	3.1 TITL		C-HT	D Change Addition
	- · ·		L DELETE				WILLIAM R. CAREY, JR.
NAME	DOMINICI, PETER	450		3.2 NAM			120 WILLIAM RICARE, SINTE ISO
STREET ADDRESS	120 W. HYDE PARK PL., SUITE	150		3.3 STRE	ETA	ADDRESS	120 bi fide interpolice, some 150
CITY-ST-ZIP	TAMPA FL 33806			3.4 CITY		ZIP	TAMAA, FL 37606
TITLE	DV		DELETE	4.1 TITLE	E		Change Addition
NAME	SUTTER, HOWARD			4.2 NAM	ΙĘ		JAMES O. SWANTE TO W. HYDE PANK PLACE, SUITE 150
STREET ADDRESS	500 W CYPRESS CREEK ROAD	, SUITE 200)	4.3 STRE	ET A	DDRESS	NO W. HYDEPAULPLACE, SUITE 180
CITY-ST-ZIP	FT. LAUDERDALE FL 33309			4.4 CITY	-51-2	ZIP	TAMPA, R 33606
TITLE	D .	=	DELETE	5.1 TITLE			D, V Addition
NAME	COCCHIARO, RICHARD			5.2 NAM		İ	CO CCHIARO, RICHAMO
STREET ADDRESS	20 N. WACKER DR. #1360					ADDRESS	1519 EDGEWOOD LAWE
							· ·
CITY-ST-ZIP	CHICAGO IL 60606			5.4 CITY		ZIP	WINNETKA, IL 60093
TITLE	D ·		DELETE	6.1 TITLE			D. V Change Addition
NAME	TUNSTALL, GORDON		,	6.2 NAM			
STREET ADDRESS	120 W. HYDE PARK PL., SUITE	150		6.3 STRE	ET A	DDRESS	12566 CLASSIC DRIVE JAM
CITY-ST-ZIP	TAMPA FL 33606			6.4 CITY	-ST-2	žIP	COROL SAUNGS, FL 33071

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 on an attachment with an address.

(RIZ)258-8855