

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

PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED
May 07, 1999 8:00 am
Secretary of State

05-07-1999 90058 031 ***150.00

DOCUMENT # P94000070488

1. Corporation Name

CTNY EMPLOYEE LEASING COMPANY, INC.

Principal Place of Business
4900 MANATEE AVENUE WEST
SUITE 101
BRADENTON FL 34209

Mailing Address
4900 MANATEE AVENUE WEST
SUITE 101
BRADENTON FL 34209

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/22/1994

4. FEI Number

65-0527168

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 owes the current year Intangible

Personal Property Tax.

Yes

No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

9. Name and Address of Current Registered Agent

RIDDELL, JEFFERY F
3400 S. TAMiami TRAIL
SARASOTA FL 34239

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

10. Name and Address of New Registered Agent

81 Name Calvert A. Courtney

82 Street Address (P.O. Box Numbers Not Acceptable)

2202-G ST. W

83

84 City Palmetto, FL

FL

85 Zip Code 34221

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)

4/26/99

12. OFFICERS AND DIRECTORS

TITLE PSTD
NAME TWIGG, JEFFERY K
STREET ADDRESS 8382 SHADOW PINE WAY
CITY-ST-ZIP SARASOTA FL 34238

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PSTD
1.2 NAME Calvert Courtney
1.3 STREET ADDRESS 2202-G ST. W
1.4 CITY-ST-ZIP Palmetto FL 34221

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0467889