

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000044901

FILED
Apr 27, 2002 8:00 AM
Secretary of State

Entity Name: PASCO EMPLOYEE SERVICES, INC.

Current Principal Place of Business:

13839 US BY PASS
DADE CITY, FL 33525

New Principal Place of Business:

37505 LAYTON ROAD
DADE CITY, FL 33525

Current Mailing Address:

13839 US BY PASS
DADE CITY, FL 33525

New Mailing Address:

37505 LAYTON ROAD
DADE CITY, FL 33525

FEI Number: 59-3322893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GULLEN, GLORIA J
13839 US 98 BY PASS
DADE CITY, FL 33525 US

Name and Address of New Registered Agent:

GULLEN, GLORIA J
37505 LAYTON ROAD
DADE CITY, FL 33525 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

04/27/2002

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPST () Delete
Name: GULLEN, GLORIA J
Address: 13848 4TH ST., #205
City-St-Zip: DADE CITY, FL

Title: P () Delete
Name: O'CONNELL, CAROL D
Address: 38053 PASCO AVE.
City-St-Zip: DADE CITY, FL 33525

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPST (X) Change () Addition
Name: GULLEN, GLORIA J
Address: 37505 LAYTON ROAD
City-St-Zip: DADE CITY, FL 33525

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLORIA J. GULLEN

Electronic Signature of Signing Officer or Director

MS.

04/27/2002

Date