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FILED

**May 14 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 # P95000086675 (2)

1. Corporation Name
ON THE JOB SERVICES, INC.



Principal Place of Business
**8179 EGRET ROAD
FT. MYERS FL 33912**

Mailing Address
~~P O BOX 6570~~
~~FT. MYERS FL 33911-6570~~
~~US~~

3. Date Incorporated or Qualified **11/13/1995** 3a. Date of Last Report **05/01/1996**

2. Principal Place of Business

2a. Mailing Address **P.O. Box 2262**

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State **Foot MYERS FL**

23 Zip Country

28 Zip Country **33902 USA.**

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4. FEI Number **65-0619260** 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

10. Name and Address of New Registered Agent

**RAINEY, KEVIN H
8179 EGRET ROAD
FT. MYERS FL 33912**

81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 City **FL** 85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
NAME **P RAINEY, KEVIN H**
STREET ADDRESS **8179 EGRET ROAD**
CITY-ST-ZIP **FT. MYERS FL 33912**

1.1 TITLE Change Addition
1.2 NAME **RAINEY, Kevin H.**
1.3 STREET ADDRESS **8179 EGRET ROAD**
1.4 CITY-ST-ZIP **FT. MYERS, FL 33912**

TITLE DELETE
NAME **ST ANDERSON, HOWARD**
STREET ADDRESS **2338 WILLARD ST.**
CITY-ST-ZIP **FT. MYERS FL 33901**

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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

[Handwritten Signature] 4-15-97 641-33-1460

CR2E02 (1/9/96)