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FILED
Mar 25 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000030083 (5)
1. Corporation Name
EXECUTIVE SEARCH SOLUTIONS, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 215 NORTH EOLA DRIVE ORLANDO FL 32801		Mailing Address 215 NORTH EOLA DRIVE ORLANDO FL 32801	
2. Principal Place of Business 21 225 S. Westmonte Drive Suite, Apt. #, etc. 22 Suite 2040 City & State 23 Altamonte Springs, FL Zip 24 32714		2a. Mailing Address 26 215 N. Eola Drive Suite, Apt. #, etc. 27 City & State 28 Orlando, FL Zip 29 32801	
Country 25 US		Country 30 US	

3. Date Incorporated or Qualified 04/05/1996	
4. FEI Number 59-3382511	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent COWAN, CHARLES B 16 TRILBY BRANCH LONGWOOD FL 32770		10. Name and Address of New Registered Agent 81 Name H. Greg McNeill 82 Street Address (P.O. Box Number is Not Acceptable) Lowndes, Drosdick, Doster, Kantor & Reed, P.A. 83 215 North Eola Drive 84 City Orlando FL 85 Zip Code 32801	
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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. Each 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 2-17-98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	DP
NAME	COWAN, CHUCK B	1.2 NAME	COWAN, CHARLES B.
STREET ADDRESS	225 S. WESTMONTE DR. #2040	1.3 STREET ADDRESS	225 S. Westmonte Drive, Suite 2040
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 32714	1.4 CITY-ST-ZIP	Altamonte Springs, FL 32714
TITLE	EVP	2.1 TITLE	DTEV
NAME	MEYER, GERALD W.	2.2 NAME	MEYER, GERALD W.
STREET ADDRESS	225 S WESTMONTE DR. #2040	2.3 STREET ADDRESS	225 S. Westmonte Drive, Suite 2040
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	2.4 CITY-ST-ZIP	Altamonte Springs, FL 32714
TITLE	EVP	3.1 TITLE	DSEV
NAME	SIMMONS, MARK R.	3.2 NAME	SIMMONS, MARK R.
STREET ADDRESS	225 S WESTMONTE #2040	3.3 STREET ADDRESS	225 S. Westmonte Drive, Suite 2040
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	3.4 CITY-ST-ZIP	Altamonte Springs, FL 32714
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 my address.

SIGNATURE: _____ DATE 2-17-98 407/862-2322

CR2E034 (10/97)