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

PROFIT. CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT #

1. Corporation Name

	CAREER	CONNECTION OF GAINES	VILLE, INC.								
į	Principal Place	of Rusiness	Mailing Address							(8)	
Ì	Principal Place of Business 9511 NW 6TH PLACE GAINESVILLE FL 32607 Mailing Address 9511 NW 6TH PLACE GAINESVILLE FL 32607						DO NOT WRITE	IN THIS	SPACE		
	والمنافية ولمنافية والمنافية والمنافية والمنافية والمنافية والمنافية والمناف						3. Date Incorporated or Qualifed	- 114 11110	OI AOL	<u> </u>	1
	,						05/20/1996				l
ł	2. Principal Pl	Principal Place of Business 2a. Mailing Address					4. FEI Number	_~	Apr	olied For	l
Ì	21 905					600e 59-3388311			Not	Applicable	
İ		Suite, Apt. #, etc.					5. Certifcate of Status Desired		\$8.75 A		
	22 Suite A 27						3. Certificate of Guarda Desired	<u> </u>	Fee Red	quired	-
ŀ	- City & State - City & State					ا ــــــــــــــــــــــــــــــــــــ	6. Election Campaign Financing		\$5.00		
ļ	23 <u>Ga</u>	airesvill PC 28					Trust Fund Contribution		Added to	Fees	
ŀ	Zip	Country	Zip	Count	У		8. This corporation owes the current	it year Inta	ngible □Yes	MNο	
ŀ	24 326	0 25	29 3	:0			Personal Property Tax. 10. Name and Address of New Re	aistered A		<u> </u>	l
ł	Name and Address of Current Registered Agent						10. Name and Addicas of New No.	giotoi ou 7	.90		l
Į	HORTON, DORIS L 9511 NW 6TH PLACE GAINESVILLE FL 32607				'						
Į					2 Street A	Addres	ss (P.O. Box Number is Not Acceptable	e)			ĺ
Į					3						
1									T		
				8	4 City			FL	85 Zip C	ode	l
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the					ve-named c	corpor	ation submits this statement for the pu	irpose of o	hanging its	registered	1
إ.	office or re	egistered agent, or both, in the State of familiar with, and accept the obligation	's_board.of.directors_l.hereby.accept_l	the appoin	tment as reg	istered	-				
Į	office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation 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: Register				ent signature rec	quired v		DATE			a
	12.	OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFI	CERS AN			5
	TITLE	D	☐ DELETE	1.1 TITLE 1.2 NAME					☐ Change	Addition	5
	NAME	HORTON, DORIS L									5
	STREET ADDRESS	9511 NW 6TH PLACE		ET ADDRESS						Ü	
	CITY-ST-ZIP	GAINESVILLE FL 32607			1.4 CITY-ST-ZIP				Change	Addition	٥
	TITLE			2.1 TITLE	2.1 TITLE 2.2 NAME					[-
ļ	NAME				1						
	STREET ADDRESS				ET ADDRESS						
	CITY-ST-ZIP		☐ DELETE	2.4 City 3.1 TITLE					Change	☐ Addition	
	THAME TE-				32 NAME						
	STREET ADDRESS				3.3 STREET ADDRESS			· "			Γ
	CITY-ST-ZIP	-1		3.4. CITY							
ł	TITLE		☐ DELETE	4.1 TITLE					☐ Change	Addition	
	NAME			4. 2 NAM						}	}
	STREET ADDRESS				3 STREET ADDRESS						
	CITY-ST-ZIP				ST-ZIP					,	
	TITLE		☐ DELETE	5.1 TITLE	TLE				☐ Change	☐ Addition	ĺ
	NAME	5.2 NA		5.2 NAME	: I						1

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, graph an attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

□ DELETE

Change

☐ Addition

Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90017 018 ***150.00