

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
Apr 19, 1999 8:00 am
Secretary of State

04-19-1999 90001 026 ***158.75

DOCUMENT # P98000000382

1. Corporation Name

PROFESSIONAL RESOURCE PARTNERS, INC.

Principal Place of Business

106 TOURNAMENT ROAD
PONTE VEDRA BEACH FL 32082

Mailing Address

106 TOURNAMENT ROAD
PONTE VEDRA BEACH FL 32082

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/02/1998

4. FEI Number

59-3486461

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional

Fee Required

6. Election Campaign Financing

□

\$5.00 May Be

Trust Fund Contribution

Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

□ Yes

X No

9. Name and Address of Current Registered Agent

PAPAS, WENDY M
106 TOURNAMENT ROAD
PONTE VEDRA BEACH FL 32082

10. Name and Address of New Registered Agent

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 Wendy M Papas

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4.14.99

12. OFFICERS AND DIRECTORS

TITLE	D	□ DELETE
NAME	PAPAS, WENDY M	
STREET ADDRESS	106 TOURNAMENT ROAD	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082	
TITLE	D	X DELETE
NAME	MARTINI, STEPHEN	
STREET ADDRESS	106 TOURNAMENT ROAD	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082	
TITLE	D	X DELETE
NAME	GEORGE, SYLVIA	
STREET ADDRESS	106 TOURNAMENT ROAD	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082	
TITLE	D	□ DELETE
NAME	PAPAS, STEVEN	
STREET ADDRESS	106 TOURNAMENT ROAD	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082	
TITLE		□ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		□ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	S	PAPAS, MATTHEW	□ Change X Addition
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE	S	Secretary/Treasurer	□ Change X Addition
2.2 NAME		MATTHEW P. PAPAS, MATTHEW	
2.3 STREET ADDRESS		106 TOURNAMENT ROAD	
2.4 CITY-ST-ZIP		PONTE VEDRA BEACH, FL 32082	
3.1 TITLE			□ Change □ Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE			□ Change □ Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE			□ Change □ Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE			□ Change □ Addition
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

4.14.99

Date

Daytime Phone #

904.273.5599

CR2E034 (11/98)