


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000098620
 1. Entity Name
CENTURY PERSONNEL, INC.



Principal Place of Business Mailing Address
3321 SCRUB OAK LANE **PO BOX 16261**
JACKSONVILLE, FL 32223 US **JACKSONVILLE, FL 32245 US**

DO NOT WRITE IN THIS SPACE



02222004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
59-3544400 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
GUERNSEY, STEVE
3321 SCRUB OAK LANE
JACKSONVILLE, FL 32223

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

000000065031
 02/25/04-80020-002 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SPD GUERNSEY, STEVE 3321 SCRUB OAK LANE JACKSONVILLE, FL 32223
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTV GUERNSEY, CHRISTINE 3321 SCRUB OAK LANE JACKSONVILLE, FL 32223
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Steven E. Guernsey 2/23/04 545-3945
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #