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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jan 20 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V01622

(2)

GENERAL PERSONNEL CONSULTANTS OF ATLANTA, INC.

Principal Place of Business		Mailing Address	Mailing Address		18514 111311 88161 1546 61116 1618	A BIBNI BIBNI BYBNI BIBNI B	TOTA OFOLI HORY
5125 ADANSON STREET		5125 ADANSON STREET	5125 ADANSON STREET				
#400		#400			DO NOT WRITE IN THIS SPACE		
ORLANDO FL 32804		ORLANDO FL 32804 US	US		3. Date Incorporated or Qualified		
		50			12/20/1991		
2. Principal P	lace of Business	2a. Mailing Address			4, FEI Number		Applied For
21		26			59-3105906		Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional
22		[27]			5. Certificate of Status Desired	Fee	Required
City & State	е	City & State			8. Election Campaign Financing		0 May Be
[23] Zip	Country	28 Zip	Country		Trust Fund Contribution		d to Fees
24	25	29	30		This corporation owes or has pai Personal Property Tax due June		Intangible No
24	g. Name and Address of Curre		1301	1	10. Name and Address of New Re		<u></u>
WIL	LIAM P. WEATHERFORD, JR.		81 Na	ame			
	82 Str	rant Addrson	s (P.O. Box Number is Not Acceptab	la)			
1031 MORSE BOULEVARD STE 105			62 50	reel Addres	s (P.O. Box Number is Not Acceptato	10)	
WW	83						
			84 Cit	tu.		lee Z	p Code
			B4 CR	ty		FL 85 Zig	2 Code
11, Pursuant i	to the provisions of Sections 607.05	02 and 607.1508, Florida Statut	les, the above-nar	med corpora	ation submits this statement for the piles board of directors. I hereby accept	urpose of changing	its registered
agent. I a	m familiar with, and a ccept the obliq	gations of, Section 607.05 05 , FI	orida Statutes.	corporation	is board or directors. Thereby accep	л те арролитента	is registered
SIGNATURE							
	Stonature, typed or printed name of registered ac		F: Registered Agent sign	nature required v		DATE	
12.	PD OFFICERS AN	ND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	
NAME	LOVELACE, G. WINSTON	DELENE	1.1 TITLE			Change	, C Youlion
STREET ADDRESS	83 INTERLAKEN ROAD		1.2 NAME	occe.			
CITY-ST-ZIP	ORLANDO FL		1.3 STREET ADDR		3.2	804	
TITLE	One-vibo 12	DELETE	1.4 CITY-ST-ZIP	<u> </u>		Change	Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET ADDR	RESS			
CITY-ST-ZIP			2. 4 CITY - ST - ZIP				
TITLE		DELETE	3.1 TITLE			Change	e Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDR	RESS			
CITY-ST-ZIP			3.4. CITY - ST - ZIP)			
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRI	ESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
THTLE		☐ DELET E	5.1 TITLE			☐ Change	e ∐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRI	1			ſ
CITY-ST-ZIP		Doctor	5.4 CITY - ST - ZIP				
TITLE		☐ DELETE	6.1 TITLE			L. Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRE				
CITY-ST-ZIP	ertify that the information cumplied a	with this filing doos not quality b	6.4 CITY-ST-ZIP		ction 119.07(3)(i), Florida Statutes. H	further certify that #	a information
indicated -	on this annual report or supplement	al annual report is true and acc	curate and that my	y signature s	shall have the same legal effect as if	made under oath; t	that I am an
	director of the corporation or the rec or Block 13 if chan <mark>ge</mark> d, or on an atta		execute this repor	rt as require	d by Chapter 607, Florida Statutes; a	and that my name a	ppears in