

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Teresa B. Murrain
Secretary of State
Tallahassee, Florida 32399-0001

APPROVED
AND
FILED

5/11/95 11:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V57035** (0)
EMPLOYER SERVICE CORPORATION OF FL., INC.

1. Principal Office (Not Required)		2a. Mailing Address	
402 SOUTH KENTUCKY AVE. 4TH FLOOR LAKELAND FL 33801 US		P.O. BOX 911 LAKELAND FL 33802 US	
2. Principal Office (Not Required)	2a. Mailing Address	3. Date Incorporated or Created	3a. Date of Last Report
21	26	08/12/1992	04/04/1994
22	27	4. FEE Number	4a. Amount For Not Applicable
23	28	59-3136340	
24	29	5. Certificate of Status (Required)	\$8.75 Additional Fee Required
25	30	6. Election Campaign Finance and Trust Fund Contributions	\$5.00 May Be Added to Fees
26	31	7. Foreign Corporation (Not Required)	Florida Corporation

9. Name and Address of Current Registered Agent

SUTTON, CARLOS K.
4210 ROLLING OAK DRIVE
LAKELAND FL 33801

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Accepted)

83.

84. City

FL 85. Zip Code

11. If principal office has been changed since the last report, the officer must complete this statement for the purpose of changing the registered office or registered agent on file in the State of Florida. If no change was made, the officer must complete this statement for the purpose of changing the registered office or registered agent on file in the State of Florida. If no change was made, the officer must complete this statement for the purpose of changing the registered office or registered agent on file in the State of Florida.

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	P HUGHES, JOHN O 910 FAIRLINGTON DRIVE LAKELAND FL	NAME	
STREET ADDRESS		STREET ADDRESS	
CITY	D SUTTON, CARLOS K 4210 ROLLING OAK DRIVE LAKELAND FL	CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	

14. I hereby certify that the information given in this report is true and correct, and that the corporation is in good standing with the State of Florida. I further certify that the information given in this report is true and correct, and that the corporation is in good standing with the State of Florida. I further certify that the information given in this report is true and correct, and that the corporation is in good standing with the State of Florida.

SIGNATURE: John Hughes
5/1/95 813-687 3142