

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000028791

FILED
Feb 18, 2011
Secretary of State

Entity Name: MASTERLINK CORPORATION

Current Principal Place of Business:

3649 ALL AMERICAN BLVD
ORLANDO, FL 32810

New Principal Place of Business:

Current Mailing Address:

3649 ALL AMERICAN BLVD
ORLANDO, FL 32810

New Mailing Address:

FEI Number: 65-0555111 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WEISNER, KENT A
3201 CULLEN LAKE SHORE DRIVE
BELLE ISLE, FL 32812 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: CCEO
Name: LANGFITT, SAMUEL E
Address: 61 COUNTRY CLUB RD.
City-St-Zip: COCOA BEACH, FL 32931

Title: PDS
Name: WEISNER, KENT A
Address: 3201 CULLEN LLKE SHORE DRIVE
City-St-Zip: BELLE ISLE, FL 32812

Title: D
Name: MCBRIDE, DENNIS K
Address: 7421 SHREVE ROAD
City-St-Zip: FALLS CHURCH, VA 22043

Title: VP
Name: FRIAR, GARY E
Address: 3201 MISTY MORNING CT.
City-St-Zip: SAINT CLOUD, FL 34771

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: KENT A. WEISNER

PRES

02/18/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date