

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001485

FILED
Feb 09, 2005
Secretary of State

Entity Name: THE WALTER LINK FOUNDATION, INC.

Current Principal Place of Business:

7350 S TAMiami TRAIL
SUITE 214
SARASOTA, FL 34231

New Principal Place of Business:

7350 S. TAMiami TRAIL
SUITE 214
SARASOTA, FL 34231 US

Current Mailing Address:

7350 S TAMiami TRAIL
SUITE 214
SARASOTA, FL 34231

New Mailing Address:

7350 S. TAMiami TRAIL
SUITE 214
SARASOTA, FL 34231 US

FEI Number: 22-3696493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VALENTE, THOMAS
1526 STICKNEY POINT ROAD
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

THOMAS, VALENTE P
7350 S. TAMiami TRAIL
SUITE 214
SARASOTA, FL 34236 US

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: THOMAS VALENTE

02/09/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: LINK, WALTER
Address: 7350 S TAMiami TRAIL SUITE 214
City-St-Zip: SARASOTA, FL 34231

Title: P () Delete
Name: VALENTE, THOMAS
Address: 7350 S TAMiami TRAIL SUITE 214
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: LINK, WALTER
Address: 7350 S. TAMiami TRAIL SUITE 214
City-St-Zip: SARASOTA, FL 34231 US

Title: P (X) Change () Addition
Name: VALENTE, THOMAS
Address: 7350 S. TAMiami TRAIL SUITE 214
City-St-Zip: SARASOTA, FL 34231 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS VALENTE

P

02/09/2005

Electronic Signature of Signing Officer or Director

Date