

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000001572

FILED  
Jun 12, 2012  
Secretary of State

**Entity Name:** THE WINNING LINK, INC.

**Current Principal Place of Business:**

10032 LANCASHIRE DR  
JACKSONVILLE, FL 32219

**New Principal Place of Business:**

**Current Mailing Address:**

10032 LANCASHIRE DR  
JACKSONVILLE, FL 32219

**New Mailing Address:**

**FEI Number:** 30-0195393

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MCCALL, TIFFANY  
10032 LANCASHIRE DR  
JACKSONVILLE, FL 32219 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:** P  
**Name:** MCGARRAH, HARRIETT  
**Address:** 369 SHORT LEAF PLACE  
**City-St-Zip:** THOMASVILLE, GA 31792

**Title:** VP  
**Name:** MCCALL, TIFFANY  
**Address:** 10032 LANCASHIRE DR  
**City-St-Zip:** JACKSONVILLE, FL 32219

**Title:** S  
**Name:** THOMAS, TAMARA  
**Address:** 313 W CALHOUN STREET  
**City-St-Zip:** THOMASVILLE, GA

**Title:** T  
**Name:** LAWSON, CAROLYN  
**Address:** 369 SHORT LEAF PLACE  
**City-St-Zip:** THOMASVILLE, GA 31792

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** TIFFANY MCCALL

CFO

06/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date