

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # K20508 (3)

1. Corporation Name  
LINKS GROUP, INC.



Principal Place of Business  
140 ROYAL PALM WAY, STE 103  
P O BOX 3243  
PALM BEACH FL 33480

Mailing Address  
140 ROYAL PALM WAY, STE 103  
P O BOX 3243  
PALM BEACH FL 33480

3. Date Incorporated or Qualified 04/08/1988 3a. Date of Last Report 04/03/1995

2. Principal Place of Business  
21 1808 COLONY WAY  
Suite, Apt. #, etc.

2a. Mailing Address  
26 1808 COLONY WAY  
Suite, Apt. #, etc.

4. FEI Number 65-0040695 Applied For Not Applicable

22 City & State  
23 JUPITER, FL

27 City & State  
28 JUPITER, FL

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 33478 25 Country 29 33478 30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WEBSTER III, JOSEPH A.  
140 ROYAL PALM WAY, STE 103  
PALM BEACH FL 33480

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83 1808 COLONY WAY  
84 City JUPITER FL 85 Zip Code 33478

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [Signature] JOSEPH A WEBSTER III 3-14-96  
Signature, typed or printed name of registered agent and title in application (NOTE: Registered Agent's signature required when renewing)

12. OFFICERS AND DIRECTORS  
TITLE D  
NAME MARTYN, CHARLES P., III  
STREET ADDRESS 393 TEQUESTA DR  
CITY-ST-ZIP TEQUESTA FL  
TITLE D  
NAME WEBSTER, JOSEPH A., III  
STREET ADDRESS 140 ROYAL PALM WAY #103  
CITY-ST-ZIP PALM BEACH FL  
TITLE D  
NAME BRADSHAW, CHARLES J.  
STREET ADDRESS 705 FRONT ST  
CITY-ST-ZIP GEORGETOWN SC 29440  
TITLE D  
NAME ROSE, WILLIAM S., JR.  
STREET ADDRESS 11 JESSAMINE PLACE  
CITY-ST-ZIP HILTON HEAD ISL SC  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 1808 COLONY WAY  
2.4 CITY-ST-ZIP JUPITER, FL 33478  
3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] JOSEPH A WEBSTER III 3-14-96 407525-5886  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (12/95)