

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000005113

FILED
Apr 07, 2009
Secretary of State

Entity Name: LINK & ASSOCIATES, LLC

Current Principal Place of Business:

830 SW 174 TERRACE
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

830 SW 174 TERRACE
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 51-0615936

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINK, SHANE M
830 SW 174 TERRACE
PEMBROKE PINES, FL 33029 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LINK, SHANE M
Address: 830 SW 174 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LINK, SHANE M
Address: 830 SW 174 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGRM () Change (X) Addition
Name: PARKER, LISCHIA M
Address: 830 SW 174 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SHANE M LINK

MGRM

04/07/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date