

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 11, 2005 8:00 am
Secretary of State

08-11-2005 90004 007 ****70.00

DOCUMENT # N02000004247 1. Entity Name LUPUS LINK, INC.					
Principal Place of Business 3185 STEAMBOAT RIDGE ROAD P.O. Box 11592 DAYTONA BEACH, FL 32128-11592				Mailing Address P.O. Box 11592 3185 STEAMBOAT RIDGE ROAD DAYTONA BEACH, FL 32128-11592	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 27-0015811				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)</small>					
Filing Fee is \$61.25 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE	Advisor <input checked="" type="checkbox"/> Delete Keep				
NAME	TURNIGREN, MELANIE				
STREET ADDRESS	3185 STEAMBOAT RIDGE ROAD				
CITY-ST-ZIP	DAYTONA BEACH, FL 32128				
TITLE	SD <input checked="" type="checkbox"/> Delete				
NAME	HALL, LISA				
STREET ADDRESS	3185 STEAMBOAT RIDGE ROAD				
CITY-ST-ZIP	DAYTONA BEACH, FL 32128				
TITLE	TD <input checked="" type="checkbox"/> Delete				
NAME	HAMEL, MARY GRACE				
STREET ADDRESS	3185 STEAMBOAT RIDGE ROAD				
CITY-ST-ZIP	DAYTONA BEACH, FL 32128				
TITLE	President <input type="checkbox"/> Delete				
NAME	Anna L. Pintiliano				
STREET ADDRESS	58 Spinnaker Dr				
CITY-ST-ZIP	Daytona, FL 32119				
TITLE	Vice President <input type="checkbox"/> Delete				
NAME	Jim Brittain				
STREET ADDRESS	1413 Peach Tree Rd				
CITY-ST-ZIP	Daytona Beach, FL 32114				
TITLE	<input type="checkbox"/> Delete				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Anna L. Pintiliano</i> Anna L. Pintiliano 7/19/05 386-255-2252 (w) <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					