2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008011

FILED Apr 29, 2008 Secretary of State

Entity Name: THE LINKS AT PALM COVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2371 S.W. CARRIAGE HILL TERR. 2371 SW CARRIAGE HILL TERRACE

PALM CITY, FL 34990 PALM CITY, FL 34990

Current Mailing Address: New Mailing Address:

2371 S.W. CARRIAGE HILL TERR. PO BOX 72

PALM CITY, FL 34990 HOBE SOUND, FL 33475

FEI Number: 20-0834830 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

JEFFREY R. MARGOLIS, P.A. C/O DUANE MORRIS LLP 200 SOUTH BISCAYNE BLVD., SUITE 3400 MIAMI, FL 33131 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete BLAKE, KEVIN BORINI, MARIANNE Name: Name:

2371 SW CALLIAGE HILL TERR UNIT 103 Address: 2371 SW CARRIAGE HILL TERR #201 Address:

PALM CITY, FL 34990 City-St-Zip: PALM CITY, FL 34990 City-St-Zip:

(X) Change () Addition Title: Title: () Delete

Name: MANFORD, JOANNE Name: MCMILLAN, DOUG

Address: 2371 SW CALLIAGE HILL TERR UNIT 102 Address: 2371 SW CARRIAGE HILL TERR #101

City-St-Zip: PALM CITY, FL 34990 City-St-Zip: PALM CITY, FL 34990

Title: (X) Delete Title: () Change () Addition

GREGG, JIM Name: Name: 2371 SW CARRIAGE HILL TERR UNIT 103 Address: Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip:

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 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: DOUG MCMILLAN TD 04/29/2008