

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008011

FILED  
Mar 03, 2010  
Secretary of State

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

**Current Principal Place of Business:**

2371 SW CARRIAGE HILL TERRACE  
PALM CITY, FL 34990

**New Principal Place of Business:**

**Current Mailing Address:**

955 SE FEDERAL HIGHWAY  
SUITE 202  
STUART, FL 34994

**New Mailing Address:**

56 SW ALBANY AVENUE  
STUART, FL 34994

FEI Number: 20-0834830

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COASTAL COMMUNITY ASSOCIATION MANAGEMENT S  
955 SE FED HWY, #202  
PALM CITY, FL 34990 US

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

URBANSKI, APRIL  
2371 SW CARRIAGE HILL TERRACE #102  
PALM CITY, FL 34990 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: APRIL URBANSKI

03/03/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: URBANSKI, WILLIAM  
Address: 2371 SW CARRIAGE HILL TERR #102  
City-St-Zip: PALM CITY, FL 34990

Title: VP/T  
Name: MCMILLAN, DOUG  
Address: 2371 SW CARRIAGE HILL TERR #101  
City-St-Zip: PALM CITY, FL 34990

Title: SD  
Name: URBANSKI, APRIL  
Address: 2371 SW CARRIAGE HILL TERR., #102  
City-St-Zip: PALM CITY, FL 34990

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: DOUG MCMILLAN

VP/T

03/03/2010

Electronic Signature of Signing Officer or Director

Date