

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007905

FILED  
Feb 21, 2012  
Secretary of State

**Entity Name:** JACKSONVILLE (FL) CHAPTER OF THE LINKS, INCORPORATED

**Current Principal Place of Business:**

2395 OLD PINE TRAIL  
FLEMING ISLAND, FL 32003

**New Principal Place of Business:**

10240 HEATHER GLEN DRIVE  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

2395 OLD PINE TRAIL  
FLEMING ISLAND, FL 32003

**New Mailing Address:**

10240 HEATHER GLEN DRIVE  
JACKSONVILLE, FL 32256

**FEI Number:** 59-2010794

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACKSONVILLE CHAPTER OF THE LINKS, INC.  
2395 OLD PINE TRAIL  
FLEMING ISLAND, FL 32003 US

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

JACKSONVILLE CHAPTER OF THE LINKS, INC.  
816 BUCKEYE LANE, W  
JACKSONVILLE, FL 32259 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: PATRICIA T. BIVINS

02/21/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: CODY, BETTY A  
Address: 10240 HEATHER GLEN DRIVE  
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP  
Name: DAVIS, BETTY A  
Address: 599 ALHAMBRA LANE, NORTH  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: SEC  
Name: THOMPSON, JIMMINDA  
Address: 819 TAMMY COVE LANE  
City-St-Zip: JACKSONVILLE, FL 32218

Title: FSEC  
Name: TOASTON, KELLY K  
Address: 9103 TREVI CIRCLE EAST  
City-St-Zip: JACKSONVILLE, FL 32257

Title: TREA  
Name: BIVINS, PATRICIA T  
Address: 816 BUCKEYE LANE, W  
City-St-Zip: JACKSONVILLE, FL 32259

Title: CSEC  
Name: NORMAN, MARI-ESTHER  
Address: 11367 QUAILHOLLOW DRIVE  
City-St-Zip: JACKSONVILLE, FL 32218

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: PATRICIA T. BIVINS

TREA

02/21/2012

Electronic Signature of Signing Officer or Director

Date