FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N34918

1. Corporation Name

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

PROJECT LINK, INC. (LOCAL IMPACT ON NEIGHBORHOOD KIDS)

Principal Place of Business	Maili
1315 W. SPRUCE ST.	PO £
TALIDA EL 20007	TANK

Mailing Address PO BOX 4447 TAMPA FL 33677

2a. Mailing Address

City & State

Suite, Apt. #, etc.

FILED Mar 24, 1999 8:00 am § Secretary of State

03-24-1999 90031 030 ****61.25

3. Date incorporated or Qualifed

5. Certificate of Status Desired

10/26/1989 4. FEI Number

59-2976029

10. Name and Address of Now Registered Agent 10. Name and Address of Now Registered Agent 11. Name 11. Name 11. Name 12. Street Address (P.O. Box Number is Not Acceptable) 12. Street Address (P.O. Box Number is Not Acceptable) 13. Name 14. City 15. Name 14. City 15. Name	23		28						. <u>-</u>			
8. Name and Address of Current Registered Agent 8. Name	Zip	Country	Zip	Cour			6. Election Campaign	Financing	п .			•
BRYANT, MARY E 4324 GREEN ST TAMPA FL 33607. 11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes. 13. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes. 14. City FL 15. Street Address (P.O. Box Number is Not Acceptable) 15. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes. 16. City FL 17. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes. 18. City FL 18. Street Address (P.O. Box Number is Not Acceptable) 18. City FL 19. Street Address (P.O. Box Number is Not Acceptable) 19. City FL 10. City F		25	29	30				ution			ded to	Fees
BRYANT, MARY E 4324 GREEN ST TAMPA FL 33607. 44 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and mailing with, and accept the obligations of, Section 17,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and mailing with, and accept the obligations of, Section 17,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and mailing with, and accept the obligations of, Section 17,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and mailing with, and accept the obligations of, Section 15,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 15,0503, Florida Statutes. SIGNATURE Signature, Special for a s	į	9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent						
4224 GREEN ST TAMPA FL 33607. 4 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I membrane adverted the flags of the state of Florida. Statutes. SIGNATURE SIGNATURE DC OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TIME DC NNE BRYANT, MARY E 12. I TAMPA FL 33607 TIME DV DELETE 1.1 TITLE DV DELETE 2.1 TITLE DV DELETE 2.1 TITLE DV DELETE 2.1 TITLE DV DELETE 2.1 TITLE DV DRAMPA FL 33607 TAMPA FL 33607						Name						}
TAMPA FL 33607. 11. Pursuant to the provisions of Sections 617,0502 and 617,1506. Florida Statutes, the above-named corporation submits this statement for the purpose of changing lifs registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE Signatura, board or private from a completion and life if applicable. INOTE: Repaired Agent a syndrum required when relitations. INOTE: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 INTE.	BRYANT, I	MARY E			82	82 Street Address (P.O. Box Number is Not Acceptable)						
Addition	4324 GRE	EN ST										
11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, hipsed or profited name of ingitianed agent and that it significable. OFFICERS AND DIRECTORS 11. OFFICERS AND DIRECTORS 11. TITLE DC STREET ADDRESS STREET ADDRESS	TAMPA FL	. 33607,			83							1
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	CITY-ST-ZIP	partify that the information supplied with	this filing dose				() () () (i) Florid	la Statutes I fi	urther cert) / ifv that	the inf	ormation

• I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(I), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/19/99 Baytime

813)272-5074 Daytime Phone #

(ZEU3/ (11/96).

Applied For

Not Applicable
\$8.75 Additional