

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49032

FILED  
Feb 23, 2011  
Secretary of State

**Entity Name:** NORTH BROWARD COUNTY CHAPTER, THE LINKS, INC.

**Current Principal Place of Business:**

3499 OAKS WAY BLDG 117  
UNIT 708  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 9023  
CORAL SPRINGS, FL 33075

**New Mailing Address:**

**FEI Number:** 65-0389951

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, MYRIELLE D  
7803 SW 8TH STREET  
N LAUDERDALE, FL 33068 US

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

NORTH BROWARD COUNTY CHAPTER OF THE LINKS  
3499 OAKS WAY  
BLDG 117 UNIT 708  
POMPANO BEACH, FL 33069 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: FREDERICA DIXON

02/23/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: HOUSTON-JONES, LINDA  
Address: 3499 OAKS WAY BLDG. 117, UNIT 708  
City-St-Zip: POMPANO BEACH, FL 33069

Title: VICE  
Name: MCKINLEY, CONSUELO  
Address: 3110 ESTATES DRIVE  
City-St-Zip: POMPANO BEACH, FL 33069

Title: SEC  
Name: WINSTON, EMMA  
Address: 12087 NW 31ST DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: SEC  
Name: BUCKNER, TAMASHIA  
Address: 4977 NW 67TH AVENUE  
City-St-Zip: LAUDERHILL, FL 33319

Title: TREA  
Name: DIXON, FREDERICA  
Address: 4955 NW 106TH AVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: FINS  
Name: JONES, YVONNE  
Address: 12587 NW 65TH DRIVE  
City-St-Zip: PARKLAND, FL 33076

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: FREDERICA DIXON

TREA

02/23/2011

Electronic Signature of Signing Officer or Director

Date