

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49032

FILED
Jan 19, 2012
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:

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

Name and Address of New Registered Agent:

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: _____

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

Title: VIC
Name: BROWNE, LYNDIA
Address: 216 BAYBERRY DRIVE
City-St-Zip: PLANTATION, FL 33317

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

Title: TREA
Name: DIXON, FEDERICA
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: FEDERICA DIXON

TREA

01/19/2012

Electronic Signature of Signing Officer or Director

Date