

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT, 1996

FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS



DOCUMENT # N95000003882 (6)

1. Corporation Name
GLOBAL MINDLINK FOUNDATION, INC.

Principal Place of Business

**2424 N. FEDERAL HIGHWAY
 SUITE 250
 BOCA RATON FL 33431**

Mailing Address

**2424 N. FEDERAL HIGHWAY
 SUITE 250
 BOCA RATON FL 33431**



3. Date Incorporated or Qualified
08/15/1995

3a. Date of Last Report

4. FEI Number

65-0630341

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Election Campaign Financing
 Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☒ No

9. Principal Place of Business

**900 N. Federal Highway, #380
 Boca Raton, FL 33432**

**900 N Federal Hwy
 #380 #460**

Boca Raton, FL 33432

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9. Name and Address of Current Registered Agent

**GIBBY, DANIEL J
 101 E. KENNEDY BLVD.
 SUITE 9700 BARNETT PLAZA
 TAMPA FL 33602**

81 Name

Stephen Goodman, Esq

82 Street Address

P.O. Box Number is Not Acceptable

83

Suite 460

84 City

Boca Raton

FL

85 Zip Code
33432

10. Name and Address of New Registered Agent

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 am familiar with, and accept the obligations of, Section 617.0504, Florida Statutes.

SIGNATURE

Signature typed or printed name of agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

2-10-96
 DATE

12. OFFICERS AND DIRECTORS

TITLE **Director** ☐ DELETE
 NAME **Vincent Colangelo**
 STREET ADDRESS **900 N. Fed Hwy St: 460**
 CITY-ST-ZIP **Boca Raton, FL 33432**

TITLE **Pres./Dir** ☐ DELETE
 NAME **Stephen Colangelo**
 STREET ADDRESS **900 N. Fed Hwy St: 460**
 CITY-ST-ZIP **Boca Raton FL 33432**

TITLE **Sec/Treas./Dir** ☐ DELETE
 NAME **Wj manduso**
 STREET ADDRESS **900 N. Fed Hwy St: 460**
 CITY-ST-ZIP **Boca Raton, FL 33432**

TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

100001908291
-07/30/96--01100--027
*****70.00**

☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vincent Colangelo 7/10/96

Date

Daytime Phone #

CR2E037 (12/95)