

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2005 8:00 am
Secretary of State

03-30-2005 90039 039 ****61.25

DOCUMENT # N96000004824 1. Entity Name BUSINESS NETLINK, INC.					
Principal Place of Business 6135 N BLUE ANGEL PKWY. PENSACOLA, FL 32526 US				Mailing Address 6135 N BLUE ANGEL PKWY. PENSACOLA, FL 32526 US	
2. Principal Place of Business 6904 W. Fairfield Dr Suite, Apt. #, etc.		3. Mailing Address 6904 W. Fairfield Dr Suite, Apt. #, etc.			
City & State Pensacola, FL Zip Country 32506 Escambia		City & State Pensacola, FL Zip Country 32506 Escambia		4. FEI Number 75-2666183 Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				03032005 Chg-NP CR2E037 (10/03)	
6. Name and Address of Current Registered Agent SZERZO, LOUISE 6135 N BLUE ANGEL PKWY. PENSACOLA, FL 32526				7. Name and Address of New Registered Agent Name Wayne Vanaman Street Address (P.O. Box Number is Not Acceptable) 6904 W. Fairfield Dr. City Pensacola FL Zip Code 32506	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Wayne Vanaman</u> <u>Wayne Vanaman - Secretary 24 Mar '05</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SZERZO, LOUISE 6135 N BLUE ANGEL PKWY. PENSACOLA, FL 32526	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Angel Hines 5555 Davis Hwy, Ste I Pensacola, FL 32503	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MILHEIM, VAN 945 MICHIGAN AVE., STE 5C PENSACOLA, FL 32505	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Charles Blackwell 245 W. Airport Blvd, Ste A Pensacola, FL 32504	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BLACKWELL, CHARLES 245 W AIRPORT BLVD., STE. A PENSACOLA, FL 32505	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Katherine Schipp 2220 Gloria Cr. #134 Pensacola, FL 32514	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORRISON, JIM 6847A N. 9TH AVE., STE 186 PENSACOLA, FL 32504	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Marlene Thompson 232 Delray Dr. Pensacola, FL 32507	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SADLER, TAMMY 816 STERLING WAY PENSACOLA, FL 32506	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Wendy Anderson 180 N Palafox St. Pensacola, FL 32502	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NANAMAN, WAYNE 6904 W FAIRFIELD DR. PENSACOLA, FL 32507	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Wayne Vanaman</u> <u>Wayne Vanaman</u> <u>24 MAR '05</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					