## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Feb 04 1997 8:00am

Secretary of State

Daytime Phone #

Secretary of State
DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P95000018892 (6)

	MENT # P95000 LINK CONNECTIONS, INC.	0018892 (6)			
Principal Prace of Business 13630 58TH STREET NORTH SUITE 103 CLEARWATER FL 34620		Mailing Address 13630 58TH STREET NORTH SUITE 103 CLEARWATER FL 34620-3734		L LEGINGER ME SEIER GIFFE BENK GEFFE GEF	is da lat tabbi lanat sakta rakta ihat labt
				3. Date Incorporated or Qualified 02/23/1995	3a. Date of Last Report 04/03/1996
2, Principal Pl 21	2. Principal Place of Business 2a. M			4. FEI Number 59-3302927	Applied For Not Applicable
Suite, Apt. (	t, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	3	City & State	<del></del>	6. Election Campaign Financing	\$5.00 May Be
<b>Z</b> ip	Country	Zip	Country	8. This corporation has liability for	Added to Fees intangible tax under s. 199.032, Yes No
24	25 9. Name and Address of Currer		30	Florida Statutes  10. Name and Address of New Re	
HAD	LOW, RICHARD B		81 Name	<u>,</u>	<u> </u>
220	South Franklin Street Pa Fl 33 <del>6</del> 02		82 Street Add 83 84 City	ress (P.O. Box Number is Not Accepta	
SIGNATURE			es, the above-named corpora juthorized by the corpora prida Statutes.	poration submits this statement for the tion's board of directors. I hereby acce	purpose of changing its registered opt the appointment as registered
12.	Signature, typed or printed name of registered ag	en: and tile if applicable. (NOTE D DIRECTORS	Registered Agent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFI	DAYE
TITLE	B	DELETE	1,1 TITLE	ADDITIONS/CHANGES TO OFFI	Change Addition
NAME	ETTER, B.E.		1.2 NAME		•
STREET ADDRESS CITY-S1-ZIP	13630 58TH STREET NORTH CLEARWATER FL 34620	<b>#1</b> 03	1.3 STREET ADDRESS 1.4 City-St-zip		
TITLE	VP	☐ DELETE	2.1 TITLE		Change Addition
NAME	etter, Jeffrey L.		2.2 NAME		
STREET ADDRESS	13630 58TH STREET NORTH	#103	2.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL 34620	T prietr	2.4 CITY-ST-ZIP		100
THE		DELETE	3.1 TITLE		Change Addition
NAME STREET AODRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		<b>1-1</b>	4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME CARREST ADDRESS			52 NAME		
STREET ADDRESS CITY-ST-ZIP			5.3 STREET ADDRESS		
TITLE		☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	······································	Change Addition
NAME		-	6.2 NAME		•· <u></u> ·-
STREET ADDRESS			6.3 STREET ADDRESS		
CHTY-ST-ZIF			6.4 CITY - ST - ZIP		
informatio Lam an of	n indicated on this annual report or	supplemental annual report is to the receiver or trustee empow	rue and accurate and that ered to execute this repo	d in Section 119.07(3)(i), Florida Statut t my signature shall have the same leg in as required by Chapter 607, Florida	al effect as if made under cath; that

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR