

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000033581

FILED
Jan 14, 2004
Secretary of State

Entity Name: INTERLINK CONSULTING SERVICES, INC.

Current Principal Place of Business:

834 CEDAR COVE RD
WELLINGTON, FL 33414 US

New Principal Place of Business:

1712 BREAKERS WEST BLVD.
WEST PALM BEACH, FL 33411 US

Current Mailing Address:

P O BOX 211302
WEST PALM BCH, FL 33421302 US

New Mailing Address:

FEI Number: 59-3311932 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CONNELL, THOMAS
834 CEDAR COVE ROAD
WEST PALM BEACH, FL 33414 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CONNELL, MARIA P
Address: 834 CEDAR COVE RD
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: CONNELL, THOMAS III
Address: 834 CEDAR COVE RD
City-St-Zip: WILLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CONNELL, MARIA P
Address: 1712 BREAKERS WEST BLVD.
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D (X) Change () Addition
Name: CONNELL, THOMAS III
Address: 1712 BREAKERS WEST BLVD.
City-St-Zip: WEST PALM BEACH, FL 33411

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS CONNELL

VP

01/14/2004

Electronic Signature of Signing Officer or Director

Date