

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000069862 (7)

1. Corporation Name

FUTURELINK INC.



Principal Place of Business

2396 TURPIN DR.
ORLANDO GA 32837

Mailing Address

2396 TURPIN DR.
ORLANDO GA 32837

3. Date Incorporated or Qualified
09/12/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 4228 Hunting Trail

26 4228 Hunting Trail

4. FEI Number

59-3342165

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

City & State

City & State

23 Lake Worth, FL

28 Lake Worth, FL

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24 33467

25 Palm Beach

29 33467

30 Palm Beach

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

Yes

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MIDSTATE LEGAL SUPPLY CORP.
4435 OLD WINTER GARDEN RD.
ORLANDO FL 32811

81 Name

John R. Serafini

82 Street Address (P.O. Box Number is Not Acceptable)

4228 Hunting Trail

83

84 City

Lake Worth

FL

85 Zip Code

33467

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0505, Florida Statutes.

SIGNATURE

John R. Serafini John R. Serafini, President/Director

4/10/96

Signature typed or printed name of registered agent (Title - if applicable)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME D
HAMMERMAN, TRAY
STREET ADDRESS 470 W. PACES FERRY RD.
CITY-ST-ZIP ATLANTA GA 30305

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

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

D/V/S

Hammerman, Troy
470 W. Paces Ferry Rd.
Atlanta, GA 30305

D/P

Serafini, John R.
4228 Hunting Trail
Lake Worth, FL 33467

D

Yandow, David
4110 Hickory Drive
Powder Springs, GA 30073

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 607, 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

Troy Hammerman Vice-President/Director

Date

4/10/96

Daytime Phone #

(404) 816-8411

CR2E034 (12/95)