FILE NOW: FILING FEE AFTER MAY 1 IS \$550 OO **FILED** F STATE **PROFIT** FLORIDA DEPARTMENT Feb 11 1997 8:00am CORPORATION Sandra B. Mort ANNUAL REPORT Secretary of Sta Secretary of State DIVISION OF CORPO TIONS 1997 P95000082041 (1) DOCUMENT # WEBLINK SOFTWARE, INC. Mailing Address Principal Place of Business 3717 NW 66TH PLACE 3717 NW 66TH PLACE GAINESVILLE FL 32653-0870 GAINESVILLE FL 32653 3. Date Incorporated or Qualified 3a. Date of Last Report 10/25/1995 04/05/1996 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 59-3348016 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 П Added to Fees Ço Zφ 8. This corporation has liability for intangible tax under s. 199.032, Country Zip 30 Florida Statutes 29 25 Yes No Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent SHEVLIN, STEPHEN MARYLOU SHEVLIN 1205 GANDY BLVD. N. ST. PETERSBURG FL 33702 GAINESVILLE ove-named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a office or registered agent, or both, in the State of Florida. Such change was authorize agent. I am familiar with, and agreed the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Agent signature required when reinstating) diname of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 96/6 DELETE 1.1 Change Addition 12 NME ROBERT T SHEVUN 1.3 STEET ADDRESS 3717 NW 66TH PLACE STREET ADDRESS 1.4 (TY-ST-2)P GAINESVILLE FL 32653-0870 CITY - ST - ZIP ■ DELETE 2.1 Addition 2.2 IME MARYLOU SHEVLIN 2.3 SEET ADDRESS 3717 NW 66TH PLACE STREET ADDRESS 2. 4 TY-ST-ZIP GAINESVILLE FL 32453-0870 CHY-ST-ZIP DELETE 31 LE Addition 3.2 ME 3.3 REET ADDRESS STREET ADDRESS 3.4 Y-ST-ZIP CITY - S1 - ZIP DELETE 4.1 E Change Addition 4.3 EET ADDRESS STREET ADORESS ST-ZIP CITY-ST-ZIF DELETÉ Change Addition ET ADDRESS STREET ADDRESS -ST-ZIP CHY-S1-ZIP DELETE Change Addition NAME ET ADDRESS STREET ADDRESS ST- ZIP

14. Edo hereby certify that the information supplied with this filing does not qualify for can price by certify that the information supplied with this imag does not dealing information indicated on this annual report or supplemental annual report is **true at** I am an officer or director of the corporation or the receiver or trustee empowered

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kemption stated in Section 119 07(3)(i). Florida Statutes. I further certify that the curate and that my signature shall have the same legal effect as if made under oath; that incute this report as required by Chapter 607, Florida Statutes; and that my name

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