

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

FILED

**Apr 25 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000009856 (1)
 1. Corporation Name
WEBLINK COMMUNICATIONS, INC.



Principal Place of Business 4711 126TH AVENUE NORTH CLEARWATER FL 34622-4747	Mailing Address 4711 126TH AVENUE NORTH CLEARWATER FL 34622-4747
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3. Date Incorporated or Qualified 01/31/1996	3a. Date of Last Report
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2. Principal Place of Business 21. SUITE 130 Suite, Apt. #, etc. 22. 13555 AUTOMOBILE BLVD City & State 23. CLEARWATER, FL Zip 24. 34622-3837	2a. Mailing Address 26. 13555 Automobile Blvd. Suite, Apt. #, etc. 27. #130 City & State 28. Clearwater FL Zip 29. 34622	Country 25. US Country 30. US
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4. FEI Number 59 3360960	Applied For <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**POWERS, JILL FISHER
877 EXECUTIVE CENTER DRIVE WEST
SUITE 303
ST. PETERSBURG FL 33702**

10. Name and Address of New Registered Agent
 81. Name
Scott Gostyla
 82. Street Address (P.O. Box Number is Not Acceptable)
13555 Automobile Blvd.
 83. **#130**
 84. City
Clearwater
 85. Zip Code
FL 34622

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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:  **Scott Gostyla** DATE: **4-19-97**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		<input type="checkbox"/> DELETE
TITLE	CD	<input type="checkbox"/>
NAME	GOSTYLA, SCOTT A	
STREET ADDRESS	4711 126TH AVENUE NORTH	
CITY-ST-ZIP	CLEARWATER FL 34622-4747	
TITLE	D	<input checked="" type="checkbox"/>
NAME	KOHLER, KEITH	
STREET ADDRESS	4711 126TH AVENUE NORTH	
CITY-ST-ZIP	CLEARWATER FL 34622-4747	
TITLE	PD	<input checked="" type="checkbox"/>
NAME	CIBAS, JONAS R	
STREET ADDRESS	4711 126TH AVENUE NORTH	
CITY-ST-ZIP	CLEARWATER FL 34622-4747	
TITLE	STD	<input checked="" type="checkbox"/>
NAME	MADES, SUSAN L	
STREET ADDRESS	4711 126TH AVENUE NORTH	
CITY-ST-ZIP	CLEARWATER FL 34622-4747	
TITLE	V	<input checked="" type="checkbox"/>
NAME	DEUTCH, JOHN	
STREET ADDRESS	4711 126TH AVENUE NORTH	
CITY-ST-ZIP	CLEARWATER FL 34622-4747	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.1 TITLE	PD	<input checked="" type="checkbox"/>
1.2 NAME		
1.3 STREET ADDRESS	13555 Automobile Blvd. #130	
1.4 CITY-ST-ZIP		
2.1 TITLE	DT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Bill Snowden	
2.3 STREET ADDRESS	13555 Automobile Blvd. #130	
2.4 CITY-ST-ZIP	Clearwater FL 34622	
3.1 TITLE	DV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Tom Ferguson	
3.3 STREET ADDRESS	13555 Automobile Blvd. #130	
3.4 CITY-ST-ZIP	Clearwater FL 34622	
4.1 TITLE	DS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Mike Beatty	
4.3 STREET ADDRESS	13555 Automobile Blvd. #130	
4.4 CITY-ST-ZIP	Clearwater FL 34622	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 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:  **Secretary** DATE: **4-19-97** DAYTIME PHONE #: **813-573-5660**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)