

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

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PROFIT CORPORATION ANNUAL REPORT 1997



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

FILED

97 AUG 22 AM 8:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000019636 (5)
1. Corporation Name
HORIZON LINK, INC.



Principal Place of Business
**1315 CHENEY HWY. APT G
TITUSVILLE FL 32780**

Mailing Address
**1315 CHENEY HWY. APT G
TITUSVILLE FL 32780**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/04/1996	3a. Date of Last Report
4. FEI Number	<input checked="" 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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 1340 GEORGE EDWARDS CT	26 1340 GEORGE EDWARDS CT
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 MERRITT ISLAND FL	28 MERRITT ISLAND FL
24 32953	29 32953
25 Country	30 Country

9. Name and Address of Current Registered Agent

**HARRISON, TRACY
775 E MERRITT ISLAND CAUSEWAY, SUITE 300
MERRITT ISLAND FL 32952**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

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 *Tracy Harrison King Secretary* **8/15/97**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	HARRISON, TRACY	
STREET ADDRESS	1340 GEORGE EDWARDS COURT	
CITY-ST-ZIP	MERRITT ISLAND FL 32953	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WINTERS, BRUCE	
STREET ADDRESS	1315 CHENEY HWY, APT G	
CITY-ST-ZIP	TITUSVILLE FL 32780	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HEBERT, JAY	
STREET ADDRESS	3475 PAWNEE ST	
CITY-ST-ZIP	MIMS FL 32754	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

<input type="checkbox"/> Change <input type="checkbox"/> Addition
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
<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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******165.00 ****165.00**

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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 *TRACY HARRISON KING* **8/15/97**

CR2E034 (4/97)

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HorizonLink , Inc.
1340 George Edward's Ct.
Merritt Island, FL 32953

August 15, 1997

Florida Department of State
Division Of Corporations
Annual Reports Section
P. O. Box 6327
Tallahassee, FL 32314

Dear Sirs:

Enclosed please find the 1997 Annual Report for the above referenced corporation, along with a check in the amount of \$165 representing the 1997 filing fee. After receiving the "2nd NOTICE" we became aware of the requirement to file this report. Our principal place of business changed earlier this year and a forwarding address was filed immediately. The post office forwarded the "2nd NOTICE" but we have yet to see the "1st NOTICE".

As your records will indicate, this corporation was formed during 1996. As a newly formed corporation, we were not fully aware of the filing requirements. Thus, we did not expect the "1st NOTICE" and did not miss it when it did arrive.

Given this unfortunate sequence of events, we respectfully ask your forbearance in this matter. Please accept the enclosed amount as full payment of our 1997 filing fee, thus waiving the additional amounts normally due with a filing on this date.

We appreciate your consideration of this unusual situation and await your response to our request.

We would also like to know the best manner in which to have our address updated to reflect the above.

Sincerely,


Tracy Harrison King
Secretary/Treasurer