

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**REINSTATEMENT**



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

APPROVED  
AND  
FILED

162

98 NOV 19 AM 8:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P97000034459**

1. Corporation Name

**GLOBAL LINK ASSOCIATES, INC.**

Principal Place of Business

Mailing Address

100 UNO LAGO DRIVE  
#101  
JUNO BEACH FL 33408

100 UNO LAGO DRIVE  
#101  
JUNO BEACH FL 33408

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

04/16/1997

5. FEI Number

65-0743486

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	SWANSON, DAVID A	100 UNO LAGO DR #101	JUNO BEACH FL 33408
D	SWANSON, RON R	307 KENNELWORTH PL	AUGUSTA GA 30909

000002698130--8  
-11/30/98-01131-017  
\*\*\*\*550.00 \*\*\*\*550.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

SWANSON, DAVID A  
100 UNO LAGO DRIVE  
#101  
JUNO BEACH FL 33408

Name

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

Suite, Apt. #, Etc.

City

State  
**FL**

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of  
Registered Agent

*David A. Swanson*

**NATURE REQUIRED**

REGISTERED AGENT MUST SIGN

Date **11-12-98**

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information  
on intangible tax)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

*David A. Swanson* **DAVID A. SWANSON**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**11-12-98**

Date

**561 644-9589**

Daytime Phone #

CR2E040 (9/98)

20f2



**GLOBAL LINK ASSOCIATES, INC.**  
Intl. Distribution & Procurement Services

November 17, 1998

Fl. Department of State  
Div. of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

To whom it may concern,

I just spoke with one of your representatives by phone and she stated that I should send in this letter with our filing fee payment for \$550.00. On July 20th, I sent in our corporate return in response to your second notice. I failed to send in the \$550.00 because I did not realize that the payment was due with the return.

Our Document # is P97000034459. I have enclosed a signed annual report, a copy of the report filed in July, and a check for \$550.00.

Please inform me if you have any questions. I may be reached at (561) 694-9589.

Regards,

David A. Swanson  
President