

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
PROFIT CORPORATION ANNUAL REPORT

2020



Due May 15, 2020

File Online at [www.michigan.gov/corppfileonline](http://www.michigan.gov/corppfileonline)

Identification Number <b>800013224</b>	Corporation Name LINK ADVERTISING, INC.
Resident agent name and mailing address of the registered office  <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">                     JOYCE M LINK                      1101 ALLENDALE, DR.                      SAGINAW, MI 48638                 </div> <div style="width: 35%; text-align: center;"> <div style="border: 1px solid black; padding: 5px; display: inline-block;">                         RECEIVED                           MAY 14 2020                           LARA \$25.00                     </div> <div style="margin-top: 20px; border: 1px solid black; padding: 5px; display: inline-block;">                         FILED                           JUN 19 2020                     </div> </div> </div>	
The address or the registered office  1101 ALLENDALE, DR. SAGINAW, MI 48638	For Bureau use only Fee Received <input type="checkbox"/> \$25 before May 16 <input type="checkbox"/> \$35 (May 16 - 31) <input type="checkbox"/> \$45 (June 1 - 30) <input type="checkbox"/> \$55 (July 1 - 31) <input type="checkbox"/> \$65 (Aug 1 - 31) <input type="checkbox"/> \$75 after August 31

CORPORATIONS DIVISION

To certify there are **NO CHANGES** from the previously filed report, **check this box** and **PROCEED TO ITEM 6** for signature No other sections can be completed if box is checked

1 Change mailing address of registered office in MICHIGAN (can be a P O Box)	2 Change resident agent																				
3 Change the address of the registered office in MICHIGAN ( <u>cannot</u> be a P O Box)																					
4 Describe the general nature and kind of business in which the corporation engaged in during the year covered by this report (REQUIRED)																					
5 NAME and BUSINESS OR RESIDENCE ADDRESS of officers and directors (REQUIRED)																					
	<table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;">Name</th> <th style="width:30%;">Address</th> <th style="width:10%;">City</th> <th style="width:10%;">State</th> <th style="width:10%;">Zip Code</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">President</td> <td colspan="4"></td> </tr> <tr> <td style="text-align: center;">Secretary (If different than president)</td> <td colspan="4"></td> </tr> <tr> <td style="text-align: center;">Treasurer (If different than president)</td> <td colspan="4"></td> </tr> </tbody> </table>	Name	Address	City	State	Zip Code	President					Secretary (If different than president)					Treasurer (If different than president)				
Name	Address	City	State	Zip Code																	
President																					
Secretary (If different than president)																					
Treasurer (If different than president)																					
If different than Officers	<table style="width:100%; border-collapse: collapse;"> <tr><td style="text-align: center;">Director</td><td></td></tr> <tr><td style="text-align: center;">Director</td><td></td></tr> <tr><td style="text-align: center;">Director</td><td></td></tr> <tr><td style="text-align: center;">Director</td><td></td></tr> </table>	Director		Director		Director		Director													
Director																					
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6 Signature of authorized officer or agent <b>X</b> <i>Joyce M. Link</i> Joyce M. Link	Title President	Date 5/11/2020	Phone (Optional)																		

**Filing Fee: \$25.00**  
**Report due May 15, 2020.**  
**If received by agency after May 15, penalty fees will be assessed.**

**Submit**  
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 Save time by filing online You will get an immediate response and you can elect to receive future notices by email to the resident agent The agent will also be sent an email when a document is filed, or a CID/PIN is requested You will need your Customer ID number (CID) and PIN, which can be obtained using the CID/PIN recovery page at [www.michigan.gov/corppin](http://www.michigan.gov/corppin)  
**Mail:** Return completed report with a check or money order payable to the State of Michigan to Corporations Division, P O Box 30481, Lansing, MI 48909 (517) 241-6470

If more space is needed, additional pages may be included Do not staple any items to the report Required by Section 911, 1972 PA 284, as amended