


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 16, 2007 08:00 A**  
**Secretary of State**

|  |   |
|--|---|
| DOCUMENT # F80865<br>1. Entity Name<br>ELI WINESETT & SONS, INC. |  |
|--|---|

|   |   |
|---|---|
| Principal Place of Business<br>27655 JONES LOOP RD<br>PUNTA GORDA, FL 33982-2300 US | Mailing Address<br>P.O. DRAWER 610<br>FT MYERS, FL 33902 US |
|---|---|

DO NOT WRITE IN THIS SPACE



04122007 No Chg-P CR2E034 (11/05)

|   |                                       |
|---|---------------------------------------|
| 4. FEI Number<br>59-2193329                               | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75</b> Additional Fee Required |

6. Name and Address of Current Registered Agent

WINESETT, RICHARD W  
 2248 FIRST STREET  
 FT MYERS, FL 33901

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

000000706855  
 04/24/07-80050-015 150.00

| 10. OFFICERS AND DIRECTORS                     |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DP<br>WINESETT, RICHARD W<br>1574 PASSAIC AVE<br>FT. MYERS, FL 33901  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DVST<br>WINESETT, ROBERT A<br>2652 CORTEZ BLVD<br>FT. MYERS, FL 33901 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | V<br>WINESETT, NATHAN S.<br>816 E SCIRLEIN DR<br>SANDY, UT 84094      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard W. Winesett Richard W. Winesett 4/13/07 239-334-7040  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #