

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 21, 2006 08:00 AM
Secretary of State

DOCUMENT # L97000001003

1. Entity Name

WINTER-INTERNATIONAL LLC



Principal Place of Business

8825 LAKESIDE CIRCLE
VERO BEACH, FL 32963

Mailing Address

8825 LAKESIDE CIRCLE
VERO BEACH, FL 32963



01112006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0815085

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

WINTER, ROSS G
8825 LAKESIDE CIRCLE
VERO BEACH, FL 32963

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	WINTER, ROSS G
STREET ADDRESS	8825 LAKESIDE CIRCLE
CITY-ST-ZIP	VERO BEACH, FL 32963
TITLE	MGRM
NAME	WINTER, LISA H
STREET ADDRESS	8825 LAKESIDE CIRCLE
CITY-ST-ZIP	VERO BEACH, FL 32963
TITLE	MGRM
NAME	CHALSTY, JOHN S
STREET ADDRESS	10 ROCKEFELLER PLAZA SUITE 800
CITY-ST-ZIP	NEW YORK, NY 10020
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/23/06-80016-004 50.00

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IN THIS SPACE**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Ross G Winter

2/2/06

772-234-9934

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #