2005 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

FILED Feb 28, 2005 8:00 am Secretary of State

1. Entity Na	JMENT # N9500000 ES AT WINDJAMMER, INC.						02-28-2005 9	0190 04	14 ****61	.25
Principal Place of Business Mailing Address 2735 WHITNEY ROAD 2735 WHITNEY ROAD CLEARWATER, FL 33760 US CLEARWATER, FL 3376					JS			M IUEN IENI		(Binti ot loti
2. Principal	Place of Business	3. Mail	ling Address			—				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			·	02162005	Chg-NP	CR2E	037 (10/03)	
City & State		City & State				1 -0 00-00-0		pplied For tot Applicable		
Zip	Country	Zip)	Çou	ıntry		of Status Desired		\$8.75 Ac	Iditional
	6. Name and Address of Current	t Registere	d Agent		[7." Name and	Address of New R	egistered	<u>.</u>	
					Name					
	, GENE ITNEY ROAD ATER, FL 33760				Street Addre	ess (P.O. Box Number	r is Not Acceptable	e)		
							•			
					City	· 		Fl	Zip Coo	de
	e named entity submits this statement for tions of registered agent.	or the purpo	ose of changing its	registere	ed office or reg	gistered agent, or both	, in the State of Flo	rida. I am	familiar with	and accept
		•					•		-	
SIGNATURE					<u> </u>					
SIGNATURE	.Signature, typed or printed name of registered agent	t and title if appl	icable. (NOT	E: Registered	d Agent signature re	quired when reinstating)		DATE	_	
SIGNATURE		t and title if appl	9. Election Car Trust Fund (mpaign Fi	inancing	\$5.00 May Be Added to Fees		ake chec	k payable t	
SIGNATURE	Signature, typed or printed name of registered agent		9. Election Car	mpaign Fi	inancing	\$5.00 May Be Added to Fees	Flori	ake chec da Depa	rtment of S	tate :
	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2005		9. Election Car	mpaign Fi	inancing on,	\$5.00 May Be Added to Fees		ake chec da Depa	rtment of S	tate :
10. TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2005 OFFICERS AND DI SANDONATO, WILLIAM JR		9. Election Car Trust Fund (mpaign Fi Contribution	inancing on.	\$5.00 May Be Added to Fees	Flori	ake chec da Depa	rtment of S	10
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12. I hereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), 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 of ruleties empowered to execute this report as required by Chapter 617, 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: _

(727) 538-7370