## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jun 14, 2004 8:00 am Secretary of State 05-04-2004 90126 043 \*\*\*150.00

DOCUMENT # P03000056886  1. Entity Name ZDENA E. WINTER WHALEN, P.A.							05-04-2	2004 901 26	5 043 ***	<b>'</b> 150.00
Principal Place of Business 1179 CEDAR FALLS DRIVE WESTON, FL 33327  Mailing Address  1179 CEDAR FALLS DRIVE WESTON, FL 33327								128058 In Ion Ion To	-	10 JI JI JI
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			04292004	Chg-P	CR2E03	34 (10/03)	
City & State			City & State			4. FEI Numbe	56-2=	34865	Y Not	plied For Applicable
Zip				Coun	itry		of Status Desired	ءِ ت	8.75 Addi ee Required	tional
6. Name and Address of Current Registered Agent					7, Name and Address of New Registered Agent Name					
WINTER, ZDENA -1442 SPRINGSIDE DRIVE					Street Address (P.O. Box Number is Not Acceptable)					
WESTON, FL 33326					<del></del>	· · ·				
			-		City			FL	Zip Code	;
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										
FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees										
10.	1 2 1	OFFICERS AND		11.		ADDITIONS	CHANGES TO OF	FICERS AND		
TITLE NAME	D " WINTER,	ZDENA	☐ Delete	TITL NAM	_				☐ Change	Addition
STREET AODRESS CITY-ST-ZIP	1442 SPF	RINGSIDE DRIVE I, FL 33326			eet address Y-ST-ZIP					
TITLE	1		☐ Delete	TITL	LE S		<del></del>		☐ Change	Addition
STREET ADDRESS				NAM Stri	NE REET ADDRESS					
TITLE			Deiste	CITY TITL	Y-ST-ZIP		<del></del>	<del></del>	☐ Change	☐ #ddition
NAME -			A A A A THE DEBOR	MAN	vat.		• = . =		∐;Glange .	U Nousens
STREET ADDRESS CITY-ST-ZIP					Y-ST-ZIP			=	<del></del>	<del></del>
TITLE NAME			☐ Delete	TITL					☐ Change	Addition
STREET ADDRESS				STRI	REET ADDRESS					
CITY-ST-ZIP	<del> </del>				Y-ST-ZIP				7 22222	- Addition
NAME			Celete	TITL NAM	ME				☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP					REET ADORESS					
			•	CIN	Y-ST-ZIP					
TITLE:			☐ Delete	TITL	LE	<u> </u>			☐ Change	Addition
NAME STREET ADDRESS	1		☐ Delete	TITL NAA STR	LE ME REET ADORESS				☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	Certify that II	se information supplied with		TITL NAA SIR CIT	LE ME NEET ADORESS Y-ST-ZIP	Section 119 07(3)	(i) Elorida Statute	e I further can		
STREET ADDRESS CITY-ST-ZIP  12. I hereby indicated of the co	rporation or i	ine receiver of trustee emn	n this filing does not qualify for strue and accurate and that sowered to execute this report with all other like empowered.	STR COT the exe my signed t as required.	LE ME SEET ADDRESS Y-ST-ZIP emption stated in ature shall have the	607, Florida Statuti	(i), Florida Statute: ct as if made unde ss; and that my ne	s. I buther cen er oath: that I a ame appears in	tily that the ir	nformation or director