

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000078574 (8)

1. Corporation Name  
**WINTAS, INC.**



Principal Place of Business: 4270 ST. RD. 426 STE. 128 WINTER PARK FL 32792 US  
Mailing Address: P.O. BOX 4027 WINTER PARK FL 32793 US

3. Date Incorporated or Qualified: 10/24/1994  
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business: 21 [Blank], 22 [Blank], 23 [Blank], 24 [Blank]  
2a. Mailing Address: 26 P.O. Box 3171, 27 [Blank], 28 Orlando, Fla., 29 [Blank], 30 USA

4. FEI Number: 59-3292644  
5. Certificate of Status Desired: [ ] \$8.75 Additional Fee Required  
6. Election Campaign Financing: [ ] \$5.00 May Be Added to Fees  
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: [ ] Yes [ ] No

9. Name and Address of Current Registered Agent: RUDOLPH, CRAIG W 2596 CREEKVIEW CIR OVIEDO FL 32765

10. Name and Address of New Registered Agent: 81 Name: Roy W. Reid, 82 Street Address: 11 N. Summerlin Ave., 83 [Blank], 84 City: Orlando, FL, 85 Zip Code: 32801

11. Pursuant to the provisions of Sections 607.0507 and 607.0508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Roy W. Reid* Roy W. Reid, Chairm of Board, 4/12/96, DATE

12. OFFICERS AND DIRECTORS

TITLE	PTS	<input checked="" type="checkbox"/> DELETE
NAME	RUDOLPH, CRAIG W	
STREET ADDRESS	2596 CREEKVIEW CIR	
CITY-ST-ZIP	OVIEDO FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	MOTT, GARY L	
STREET ADDRESS	4120 TALL TREE	
CITY-ST-ZIP	ORLANDO FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Pres. & Dir.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Mott, Gary L	
2.3 STREET ADDRESS	4120 Tall Tree	
2.4 CITY-ST-ZIP	Orlando, FL 32810	
3.1 TITLE	COB & Dir.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Roy W. Reid	
3.3 STREET ADDRESS	11 N. Summerlin Ave.	
3.4 CITY-ST-ZIP	Orlando, FL 32801	
4.1 TITLE	V.P. & Dir.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Alton M. Stinson, III	
4.3 STREET ADDRESS	4128 Old Dominion Rd.	
4.4 CITY-ST-ZIP	Orlando, FL 32812	
5.1 TITLE	Sec. & Dir.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Sonja Griffin	
5.3 STREET ADDRESS	11 N. Summerlin Ave.	
5.4 CITY-ST-ZIP	Orlando, FL 32801	
6.1 TITLE	Treas. & Dir.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Sid Monzadeh	
6.3 STREET ADDRESS	108 Camphor Tree Lane	
6.4 CITY-ST-ZIP	Altamonte Spgs, FL 32714	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: *Sonja Griffin* Sonja Griffin, Sec. 4/12/96 407-423-3423

CR2E034 (12/95)