

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000071062

FILED
Apr 01, 2004
Secretary of State

Entity Name: WINDMOOR HEALTHCARE INC.

Current Principal Place of Business:

11300 US 19TH NO.
CLEARWATER, FL 33764 US

New Principal Place of Business:

Current Mailing Address:

11300 US 19TH NO.
CLEARWATER, FL 33764 US

New Mailing Address:

FEI Number: 23-2922437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLANTON, EDWIN F
825 THOMASVILLE RD
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDS () Delete
Name: BRETT, C W
Address: 19920 GULF BLVD #7
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: VTD () Delete
Name: SANDLER, KENNETH R
Address: 1965 ROCHAM BEAU DR
City-St-Zip: MALVERN, P 19355

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VTD (X) Change () Addition
Name: SANDLER, KENNETH R
Address: 1965 ROCHAM BEAU DR
City-St-Zip: MALVERN, PA 19355

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: C. WILLIAM BRETT

PDS

04/01/2004

Electronic Signature of Signing Officer or Director

Date