	2016	FLORIDA	NOT FOR	CORPORATIO	ON ANNUAL	. REPORT
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DOCUMENT# N09000001533

Entity Name: WIN OUR NATIONS, INC.

Current Principal Place of Business:

1048 AZALEA LANE COCOA, FL 32922

Current Mailing Address:

1048 AZALEA LANE COCOA. FL 32922

FEI Number: 26-4217894

Name and Address of Current Registered Agent:

BLOWES, MALCOLM C DR. 1001 GREENWOOD WAY COCOA, FL 32922 US

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:	MALCOLM BLOWES				
	Electronic Signature of Registered Agent			Date	
Officer/Directo	or Detail :				
Title P	PRESIDENT	Title	DIRECTOR		
Name B	BLOWES, MALCOLM C DR.	Name	BLOWES, PHYLLIS A		
Address 1	1048 AZALEA LANE	Address	1001 GREENWOOD WAY		
City-State-Zip: C	COCOA FL 32922	City-State-Zip:	COCOA FL 32922		
Title S	SECRETARY	Title	VPD.		
Name H	HOFIUS, MARK	Name	JENNINGS, DONALD		
Address 6	6301 WHISPERING LANE	Address	4231 TURTLE MOUND ROAD		
City-State-Zip: T	TITUSVILLE FL 32780-7447	City-State-Zip:	MELBOURNE FL 32934		
Title C	DFFICER	Title	TREASURER		
Name H	HOFIUS, MILAGROS	Name	PEARAH, MARK		
Address 6	6301 WHISPERING LANE	Address	718 WYETH STREET		
City-State-Zip: T	TITUSVILLE FL 32780-7447	City-State-Zip:	PALM BAY FL 32904		
Title C	DFFICER	Title	OFFICER		
Name D	DUNDAS, CHARLES	Name	DUNDAS, KELLEY		
Address 1	104 WEST PASCO LANE	Address	104 WEST PASCO LANE		
City-State-Zip: C	COCOA BEACH FL 32931-3608	City-State-Zip:	COCOA BEACH FL 32931-360	8	

Continues on page 2

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MALCOLM C BLOWES

PRESIDENT

01/26/2016 Date

Electronic Signature of Signing Officer/Director Detail

FILED Jan 26, 2016 Secretary of State CC9778526422

Certificate of Status Desired: No

Officer/Director Detail Continued :

Title	OFFICER	Title	OTHER
Name	JONES, REGINALD	Name	PERGAMO, DANIEL
Address	445 OXFORD AVENUE	Address	7455 BARTOW AVENUE
City-State-Zip:	MERRITT ISLAND FL 32953	City-State-Zip:	COCOA FL 32927

Title	OTHER
Name	PERGAMO, SHARON
Address	7455 BARTOW AVENUE
City-State-Zip:	COCOA FL 32927