

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 174584

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: THE WINDSOR CORPORATION

## Current Principal Place of Business:

6195 LAKE GRAY BLVD  
JACKSONVILLE, FL 32210 US

## New Principal Place of Business:

## Current Mailing Address:

C/O CHARLES SEARS  
2011 GIBSON RD  
JACKSONVILLE, FL 32207 US

## New Mailing Address:

FEI Number: 59-6069300 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STONEBURNER, GRESHAM  
STONEBURNER, BERRY, AND GOLDMAN, P.A.  
225 WATERS ST, SUITE 2050  
JACKSONVILLE, FL 32202 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: PTD ( ) Delete  
Name: PAVLIS, BLANCHE U  
Address: 1782 WHITESIDE MOUNTAIN RD  
City-St-Zip: HIGHLANDS, NC 28741

Title: D ( ) Delete  
Name: PAVLIS, PAUL A  
Address: 1210 CASIANO RD, BELAIR  
City-St-Zip: LOS ANGELES, CA 90049

Title: D ( ) Delete  
Name: PAVLIS, GEORGE A  
Address: P.O. BOX 96  
City-St-Zip: RIVERSIDE, CT 06878

Title: D ( ) Delete  
Name: PAVLIS, ALFRED U.  
Address: 494 REDDING ROAD  
City-St-Zip: FAIRFIELD, CT 06430

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: PAVLIS, PAUL A  
Address: 14038 MARGATE STREET  
City-St-Zip: SHERMAN OAKS, CA 91401

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

Title: D (X) Change ( ) Addition  
Name: PAVLIS, ALFRED U.  
Address: 494 REDDING ROAD  
City-St-Zip: FAIRFIELD, CT 06824

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHARLES A. SEARS

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04/21/2009

Electronic Signature of Signing Officer or Director

Date