

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 358910

FILED  
Jan 06, 2007  
Secretary of State

Entity Name: WINCHESTER INSURANCE, INC.

**Current Principal Place of Business:**

1425 W BROADWAY (SR426)  
P.O. BOX 620969  
OVIEDO, FL 327620969 US

**New Principal Place of Business:**

**Current Mailing Address:**

1425 W BROADWAY (SR426)  
P.O. BOX 620969  
OVIEDO, FL 327620969 US

**New Mailing Address:**

FEI Number: 59-1284417      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WINCHESTER, WILLIAM, H  
1008 LINGO CIRCLE  
OVIEDO, FL 32765 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: PD ( ) Delete  
Name: WINCHESTER, WILLIAM, H.  
Address: 1008 LINGO CIRCLE  
City-St-Zip: OVIEDO, FL 32765 US

Title: VST ( ) Delete  
Name: FORREST, LORI,  
Address: 248 ROBIN SONG RD  
City-St-Zip: CHULUOTA, FL 32766 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LORI A FORREST

VST

01/06/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date