

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 397777

Entity Name: WINRAD, INC

FILED
Apr 03, 2009
Secretary of State

Current Principal Place of Business:

3741 E. HILLSBOROUGH AVENUE
P.O. BOX 11084
TAMPA, FL 33610

New Principal Place of Business:

3741 E. HILLSBOROUGH AVENUE
TAMPA, FL 33610

Current Mailing Address:

3741 E. HILLSBOROUGH AVENUE
P.O. BOX 11084
TAMPA, FL 33610

New Mailing Address:

3741 E. HILLSBOROUGH AVENUE
TAMPA, FL 33610

FEI Number: 59-1458097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROWN, TOM FAIREILD
11720 SHELDON ROAD, P.O. BOX 23725
TAMPA, FL 33623 US

Name and Address of New Registered Agent:

BROWN, TOM FAIREILD
11720 SHELDON ROAD
TAMPA, FL 33623 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:

04/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: KHAN, NEAL
Address: 10521 MARY ROSE WAY
City-St-Zip: LITHIA, FL 33547

Title: PD (X) Delete
Name: MOTT, RICHARD
Address: 7112 COVE PLACE
City-St-Zip: TAMPA, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MOTT, RICHARD
Address: 7112 COVE PLACE
City-St-Zip: TAMPA, FL 33617

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

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: RICHARD E. MOTT

PD

04/03/2009

Electronic Signature of Signing Officer or Director

Date