

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 649484

1. Entity Name
WINNINGHAM & FRADLEY, INC.



Principal Place of Business
111 N.E. 44TH STREET
OAKLAND PARK, FL 33334

Mailing Address
111 N.E. 44TH STREET
OAKLAND PARK, FL 33334

FILED
Jul 15, 2008 08:00 AM
Secretary of State



07072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1956962
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WINNINGHAM, CARY D
2731 N.E. 41ST STREET
LIGHTHOUSE POINT, FL 33064

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000354908
07/15/08-80003-001 550.00

10. OFFICERS AND DIRECTORS

TITLE PD
NAME WINNINGHAM, CARY D.
STREET ADDRESS 2731 NE 41ST STREET
CITY-ST-ZIP LIGHTHOUSE POINT, FL

TITLE VP
NAME FRADLEY, DAVID A.
STREET ADDRESS 1500 S.W. 16 ST.
CITY-ST-ZIP BOCA RATON, FL

TITLE SEC
NAME VAUGHAN, WERNER T
STREET ADDRESS 5440 NW 79 WAY
CITY-ST-ZIP PARKLAND, FL 33067

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Cary D. Winningham 7/15/08

Date

Daytime Phone #

(954) 771-7440