


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90035 022 ****61.25

DOCUMENT # 751441
 1. Entity Name
TRADEWINDS BY THE SEA, INC.



Principal Place of Business
**2029 NORTH OCEAN BLVD.
 FORT LAUDERDALE, FL 33305**

Mailing Address
**1750 UNIVERSITY DR.
 205
 POMPANO BEACH, FL 33071**

50015829



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01302005 Chg-NP CR2E037 (10/03)

City & State

City & State

Zip Country Zip Country

4. FEI Number
59-2003419

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SIFT MGMT. SOULTIONS
 1750 UNIVERSITY DR.
 #205
 POMPANO BEACH, FL 33071**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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

**Filing Fee is \$61.25
 Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	COSTA, LUIS	2029 NORTH OCEAN BLVD #204	FORT LAUDERDALE, FL 33305	<input type="checkbox"/>
	MCELMEED, PATRICK	2029 N OCEAN BLVD., 306	FORT LAUDERDALE, FL 33305	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	Pres. Price, Angela	2029 N Ocean Blvd # 308	FT LAUDERDALE FL 33305	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Sec	Price, DALLAS	2029 N Ocean Blvd #308	FT LAUDERDALE FL 33305	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Treas.	Erday, Wally	2029 N Ocean Blvd #108	FT LAUDERDALE FL 33305	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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: _____ **1/11/05 8543416340**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #