


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007 8:00 am
Secretary of State

04-24-2007 90018 030 ****61.25

DOCUMENT # 816493

1. Entity Name
WINTER COLONY INC



Principal Place of Business 4300 EL MAR DRIVE APT. #1 LAUDERDALE BY THE SEA, FL 33308	Mailing Address 4300 EL MAR DRIVE APT. #1 LAUDERDALE BY THE SEA, FL 33308
---	---

DO NOT WRITE IN THIS SPACE



04152007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-0808224	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**HOMESTON, SUSAN
 4300 EL MAR DR #1
 LAUDERDALE BY SEA
 FT. LAUDERDALE, FL 33308**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
 Due by May 1, 2007**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD O'DELL ALLEN PICKARD, MARK 4300 EL MAR DRIVE LAUDERDALE BY THE SEA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S O'DELL ALLEN BACALIS GEORGE 4300 EL MAR DR LAUDERDALE BY SEA, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PICKARD ALLEN ROBERTS, JOE 4300 EL MAR DR LAUDERDALE BY SEA, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HOMESTON SUSAN PETTY, HOLMES 4300 EL MAR DR LAUDERDALE BY SEA, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBERTS JOE DARKES, LARRY 4300 EL MAR DR LAUDERDALE BY SEA, FL 33308
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 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: *Joe Roberts VP*
 (SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

4-15-2007 95441-5261
 Date Daytime Phone #