2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2004
Secretary of State

DOCUMENT# F02000003916

Entity Name: CROSSWIND CAPITAL, INC.

Current Principal Place of Business:

2059 MERITAGE DRIVE
SPARKS, NV 89434

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1045
LAND O LAKES, FL 34639

New Mailing Address:

FEI Number: 91-2133428 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOWLES, KEVIN
18007-C SAILFISH
LUTZ, FL 33558 US

Name and Address of New Registered Agent:

SOWLES, KEVIN
7826 BLUE SPRING DRIVE
LAND O LAKES, FL 34639 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: KEVIN SOWLES, PRESIDENT 03/28/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: SOWLES, KEVIN
Address: P.O. BOX 1045
City-St-Zip: LAND O LAKES, FL 34639

Title: PST ( ) Delete
Name: SOWLES, KEVIN
Address: P.O. BOX 1045
City-St-Zip: LAND O LAKES, FL 34639

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 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 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: KEVIN SOWLES PRES 03/28/2004
Electronic Signature of Signing Officer or Director Date