


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 26, 2005 08:00 AM
Secretary of State

DOCUMENT # F04000001259
 1. Entity Name
 WINCHESTER CAPITAL GROUP, INC.



Principal Place of Business: 603A SOUTH LOUDOUN STREET, WINCHESTER, VA 22601
 Mailing Address: 603A SOUTH LOUDOUN STREET, WINCHESTER, VA 22601

DO NOT WRITE IN THIS SPACE



08092005 No Chg-P CR2E034 (10/03)
 4. FEI Number: 01-0803160 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005

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

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	RAMSDEN, TUCKER S
STREET ADDRESS	804 RACKHAM ROAD
CITY - ST - ZIP	GIBSON ISLAND, MD 21056
TITLE	PD
NAME	SCULLY, THOMAS G JR
STREET ADDRESS	603A SOUTH LOUDOUN STREET
CITY - ST - ZIP	WINCHESTER, VA 22601
TITLE	VPST
NAME	FRAZEE, JOHN P JR
STREET ADDRESS	9512 BULL HEADLEY ROAD
CITY - ST - ZIP	TALLAHASSEE, FL 32312
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U00000377224
 08/26/05-80005-008 550.00
 U00000377224
 08/26/05-80005-009 8.75
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Thomas G. Scully, Jr. Date: 8/24/05 Daytime Phone #: 546-667-4220