

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001259

FILED
Apr 20, 2007
Secretary of State

Entity Name: WINCHESTER CAPITAL GROUP, INC.

Current Principal Place of Business:

603A SOUTH LOUDOUN STREET
WINCHESTER, VA 22601

New Principal Place of Business:

Current Mailing Address:

603A SOUTH LOUDOUN STREET
WINCHESTER, VA 22601

New Mailing Address:

FEI Number: 01-0803160 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: RAMSDEN, TUCKER S
Address: 804 RACKHAM ROAD
City-St-Zip: GIBSON ISLAND, MD 21056

Title: PD () Delete
Name: SCULLY, THOMAS G JR
Address: 603A SOUTH LOUDOUN STREET
City-St-Zip: WINCHESTER, VA 22601

Title: VPST () Delete
Name: FRAZEE, JOHN P JR
Address: 9512 BULL HEADLEY ROAD
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 Chapter 119, 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: THOMAS SCULLY

_____ Electronic Signature of Signing Officer or Director

MR.

04/20/2007

_____ Date