2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001752

Entity Name: NORTH WIND, INC.

FILED Jan 08, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1425 HIGHAM ST IDAHO FALLS, ID 83402

Current Mailing Address: New Mailing Address:

PO BOX 51174 IDAHO FALLS, ID 83405

FEI Number: 91-1814578 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VILLANE, DAVE WANGERIN, CHRISTINE 13 MEMÓRIAL PARKWAY SUITE 101 13 MEMORIAL PARKWAY

FT WALTON BEACH, FL 32569 SUITE 101 FT WALTON BEACH, FL 32548 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: CHRISTINE WANGERIN 01/08/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: PRFS (X) Change () Addition

MEDINA, SYLVIA Name: Name: MEDINA, SYLVIA PO BOX 51174 PO BOX 51174 Address: Address: City-St-Zip: IDAHO FALLS, ID 83405 City-St-Zip: IDAHO FALLS, ID 83405

Title: Title: () Delete SEC (X) Change () Addition

MARCINKOWITZ, CHARLIE Name: Name: MILLER, BRUCE PO BOX 51174 PO BOX 51174 Address: Address: IDAHO FALLS, ID 83405 IDAHO FALLS, ID 83405 City-St-Zip:

Title: Title: (X) Change () Addition **TRES**

() Delete TROST, BRAD TROST, BRADLEY W Name: Name:

PO BOX 51174 PO BOX 51174 Address: Address: City-St-Zip: IDAHO FALLS, ID 83405 City-St-Zip: IDAHO FALLS, ID 83405

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: BRADLEY W. TROST **TRES** 01/08/2007