## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F69296

Address:

City-St-Zip:

1069 MAIN STREET

SEBASTIAN, FL

FILED Jul 07, 2008 Secretary of State

Entity Nar	ne: WINDS	FAR CONSTRUCTION, INC.				
Current Principal Place of Business:				New Principal Place of Business:		
1069 MAIN STREET P.O. BOX 781390 SEBASTIAN, FL 329788390				1069 MAIN STREET SEBASTIAN, FL 329788390		
Current Mailing Address:				New Mailing Address:		
1069 MAIN STREET P.O. BOX 781390 SEBASTIAN, FL 329788390				P O BOX 781390 SEBASTIAN, FL 32978		
FEI Number:	59-2576574	FEI Number Applied For ( )	FEI Number Not App	plicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
LULICH, STEVEN 1069 MAIN STREET P.O. BOX 781390 SEBASTIAN, FL 32978 US				LULICH, STEVEN 1069 MAIN STREET SEBASTIAN, FL 32978 US		
	named entity of Florida.	submits this statement for the	purpose of changing	its registered	office or registered agent, or both,	
SIGNATURE: STEVEN LULICH				07/07/2008		
	Electro	onic Signature of Registered A	gent		Date	
		93(2)(b), F.S., the corporation diding Trust Fund Contribution ( ).	not receive the prior noti	ce.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PST ( LULICH, STEV 1069 MAIN ST SEBASTIAN, I	REET	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( LULICH, STEV 1069 MAIN ST SEBASTIAN, I	REET	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name:	V ( LULICH, LIND	) Delete A	Title: Name:	(	) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: STEVEN LULICH **PRES** 07/07/2008