## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F74837

Jan 30, 2006 Secretary of State

FILED

Entity Name: WEST WIND TRAINING CENTER, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1685 BLACKWELDER RD DELEON SPRINGS, FL 32130 US **Current Mailing Address: New Mailing Address:** 1685 BLACKWELDER RD DELEON SPRINGS, FL 32130 US FEI Number: 59-2196233 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: PRESLEY, SANDRA W 1695 BLACKWELDER RD DE LEON SPRINGS, FL 32130 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition Title: PST ( ) Delete PRESLEY, SANDRA W, Name: Name: 1685 BLACK WELDER RD. Address: Address: City-St-Zip: DELEON SPRINGS, FL 32130 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: SANDRA W. PRESLEY PRES 01/30/2006