PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	F83664
1. Corporation Name	. 0000 .
WINTER, INC.	

Mailing Address 313 12TH STREET W. **BRADENTON FL 34205**



Principal Place of Business 313 12TH STREET W. BRADENTON FL 34205 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/02/1982 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 59-2 196234 Not Applicable 26 21 \$8,75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Electic n Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip 8. This corporation owes the current year Intangible Country Zip XNo Personal Property Tax. 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name LISCH, WILLIAM R. ss (P.O. Bo:: Number is Not Acceptable) 82 519 13TH STREET WEST

BHAI	DENTUN FL 34205	83			1		
		84 City	radenton	FL 85 Zip C	205		
11. Pursuant to the provisions of Sections 607.050, and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and properly the obligations of Section 607.050s. Florida Statutes							
SIGNATUF:E Signature, typed or gented not me of registered agen and title if applicable. (NOTE: Registered Agent signature registered when reinstating.							
12.	OFFICERS AND DIRECTORS	13.	ADDITI-ONS/CHANGES TO				
TITLE	PST DELETE	1.1 TITLE		Change	☐ Addition		
NAME :	SUSIE, LILLIAN C.	1.2 NAME					
STREET ADDRESS	313 12TH STREET WEST	1.3 STREET ADDRESS					
CITY-ST-ZIP	BRADENTON, FL 00000 34205	1.4 CITY-ST-ZIP					
TITLE	☐ DELETE	2.1 TITLE		Change	☐ Addition		
NAME		2.2 NAME					
STREET ADDRESS		2.3 STREET ADDRESS					
CITY-ST-ZIP		2. 4 CITY-ST-ZIP					
TITLE	☐ DELETE	3.1 TITLE		☐ Change	☐ Addition		
NAME		3 2 NAME					
STREET ADDRESS		3 3 STREET ADDRESS					
CITY-ST-ZIP		3.4. CITY-ST-ZIP					
TITLE	DELETE	41 TITLE		Change	☐ Addition		
NAME		4.2 NAME			ļ		
STREET ADDRESS		4.3 STREET ADDRESS					
CITY-ST-ZIP		4.4 CITY-ST-ZIP					
TITLE	DELETE	5.1 TITLE		Change	☐ Addition		
NAME		5.2 NAME					
STREET ADDRESS		5.3 STREET ADDRESS					
CITY-ST-ZIP		5.4 CITY-ST-ZIP					
TITLE	☐ DELETE	6 1 TITLE		Change	Addition		
NAME		6.2 NAME					
STREET ADDRESS		63 STREET ADDRESS					
		6.4 CITY_ST_ZIP					

14. hereby certify that the informa ion supplied with this filing does not qualify for the exemption stated in Section 119.07 (3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: