



# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 31, 2004 8:00 am**  
**Secretary of State**

03-31-2004 90012 028 \*\*\*158.75

<b>DOCUMENT # F97000000774</b> 1. Entity Name <b>WINDSOR CAPITAL MORTGAGE CORPORATION</b>					
Principal Place of Business <b>169 SAXONY RD STE 115 ENCINITAS, CA 92024 US</b>			Mailing Address <b>169 SAXONY RD STE 115 ENCINITAS, CA 92024 US</b>		
2. Principal Place of Business <b>10935 USTA Sorrento Pkwy</b> Suite, Apt. #, etc. <b>350</b> City & State <b>San Diego, CA</b> Zip <b>92130</b>		3. Mailing Address <b>10935 USTA Sorrento Pkwy</b> Suite, Apt. #, etc. <b>350</b> City & State <b>San Diego, CA</b> Zip <b>92130</b>			
Country <b>USA</b>		Country <b>USA</b>		01262004 Chg-P CR2E034 (10/03)	
4. FEI Number <b>33-0378115</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>					
6. Name and Address of Current Registered Agent  <b>PARACORP INCORPORATION 236 EAST 6TH AVENUE TALLAHASSEE, FL 32303</b>			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ <b>FL</b> Zip Code _____		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DPT THRANE, FREDERIC W JR 169 SAXONY RD STE 115 ENCINITAS, CA 92024</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPB BAR-LEV, NAOMI Yael 169 SAXONY RD STE 115 ENCINITAS, CA 92024</b> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S Darlene Lee 169 SAXONY RD STE 115 ENCINITAS, CA 92024</b> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Secretary Darlene Lee 10935 USTA Sorrento Pkwy # 350 San Diego, CA 92130</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <b>Darlene Lee, SEC.</b> <span style="float: right;">3/29/04 858-436-2000 x196</span> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <span style="float: right;">Date Daytime Phone #</span>					