

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006340

FILED
Mar 02, 2007
Secretary of State

Entity Name: WINDSHIFT HOLDINGS, INC.

Current Principal Place of Business:

3183 BELLWIND CIR
VIERA, FL 32955 US

New Principal Place of Business:

Current Mailing Address:

3183 BELLWIND CIR
VIERA, FL 32955 US

New Mailing Address:

FEI Number: 59-3430673

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANGELL, EDWARDS LLP
ONE NORTH CLEMATIS STREET
STE 400
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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:

Title: PTS () Delete
Name: KOLB, LISA M
Address: 3183 BELLWIND CIR
City-St-Zip: VIERA, FL 32955

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: KOLB, LISA M
Address: 3183 BELLWIND CIR
City-St-Zip: VIERA, FL 32955 US

Title: DIR () Change (X) Addition
Name: DAVID, HATHAWAY
Address: 889 TOWER HILL ROAD
City-St-Zip: MILLBROOK, NY 12545 US

Title: DIR () Change (X) Addition
Name: JEFF, MCCARTHY
Address: 950 WINTER STREET SUITE 4600
City-St-Zip: WALTHAM, MA 02451 US

Title: DIR () Change (X) Addition
Name: SUZANNE, KING
Address: 11951 FREEDOM DRIVE SUITE 1240
City-St-Zip: RESTON, VA 20190 US

Title: DIR () Change (X) Addition
Name: LES, STRAUSS
Address: 2519 FAIRWAY ISLAND DRIVE
City-St-Zip: WELLINGTON, FL 33414 US

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: LISA KOLB

PTS

03/02/2007

Electronic Signature of Signing Officer or Director

Date