


FILED  
Apr 03, 2006 8:00 am  
Secretary of State

04-03-2006 90363 047 \*\*\*150.00

2006 FOR PROFIT CORPORATION  
ANNUAL REPORT

DOCUMENT # F99000001398					
1. Entity Name FENSTONE DEVELOPMENTS LIMITED COMPANY					
Principal Place of Business 255 NE 6TH AVE DELRAY BEACH, FL 33483			Mailing Address 255 NE 6TH AVE DELRAY BEACH, FL 33483		
2. Principal Place of Business 1105 N. FEDERAL HWY		3. Mailing Address 1105 N. FEDERAL HWY			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State BOYNTON BEACH, FL		City & State BOYNTON BEACH, FL		4. FEI Number 65-0734078	
Zip 33435		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WINTZER, WILLIAM R 255 NE 6TH AVE DELRAY BEACH, FL 33483			7. Name and Address of New Registered Agent Name WINTZER, WILLIAM R. Street Address (P.O. Box Number is Not Acceptable) 1105 N. FEDERAL HWY City BOYNTON BEACH FL Zip Code 33435		
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 <u>William R. Wintzer</u> WILLIAM R. WINTZER 3/28/06 (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BINNINGTON, ALAN <input type="checkbox"/> Delete 22, GRENVILLE ST, ST. HELIER, JERSEY CHANNEL ISLANDS, UK.				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BISSON, SANDRA <input type="checkbox"/> Delete 22, GRENVILLE ST, ST. HELIER, JERSEY CHANNEL ISLANDS, UK.				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HEMPSTER, SARASANE <input type="checkbox"/> Delete 22, GRENVILLE ST, ST. HELIER, JERSEY CHANNEL ISLANDS, UK.				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S MOURANT & CO. SECRETARIES LIMITED <input type="checkbox"/> Delete 22, GRENVILLE, ST. HELIER, JERSEY CHANNEL ISLANDS, UK.				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GOODYEAR, KIMBERLY A <input type="checkbox"/> Delete 125 A POSTA RD TAOS, NM 87571				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
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"/> Change <input type="checkbox"/> Addition				
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"/> Change <input type="checkbox"/> Addition				
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 exemptions contained 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 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: <u>Kimberly Goodyear</u> KIMBERLY GOODYEAR 3/28/06 (505) 758-5090 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					