2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# J39526

Entity Name: WINN-MAR PROPERTIES, INC.

FILED Jul 24, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1250 SEMINOLE BLVD.
P.O. BOX 958

1250 SEMINOLE BLVD.
SUITE 1

LARGO, FL 346497958 LARGO, FL 33770

Current Mailing Address: New Mailing Address:

22199 GARMISCH WAY P.O. BOX 958

BROOKSVILLE, FL 34601 US LARGO, FL 33779 US

FEI Number: 59-0774325 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:

CLARK, NORMAN R. JAMES, ROBERT M 22199 GARMISCH WAY P.O. BOX 958

BROOKSVILLE, FL 34601 US LARGO, FL 33779 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: ROBERT M JAMES 07/24/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT () Delete Title: D (X) Change () Addition

 Name:
 WIEKER, ROBERT E.,
 Name:
 WIEKER, ROBERT E

 Address:
 1250 SEMINOLE BLVD
 Address:
 1250 SEMINOLE BLVD, SUITE 1

City-St-Zip: LARGO, FL City-St-Zip: LARGO, FL 33770 US

Title: D () Delete Title: DV (X) Change () Addition

Name: WIEKER, WINIFRED L., Name: BAILEY, PENNY J

 Address:
 1250 SEMINOLE BLVD
 Address:
 1250 SEMINOLE BLVD., SUITE 1

 City-St-Zip:
 LARGO, FL
 City-St-Zip:
 LARGO, FL
 33770 US

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Title: DVS () Delete Title: DPST (X) Change () Addition Name: CLARK, NORMAN R., Name: JAMES, ROBERT M

Address: 1250 SEMINOLE BLVD. Address: 1250 SEMINOLE BLVD., SUITE 1

City-St-Zip: LARGO, FL City-St-Zip: LARGO, FL 33770 US

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 CLARK, MARY E.,
 Name:
 WIEKER ENTERPRISES,, INC.

 Address:
 1250 SEMINOLE BLVD., SUITE 1

City-St-Zip: LARGO, FL City-St-Zip: LARGO, FL 33770 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: ROBERT M JAMES P 07/24/2006