

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 17, 2004 8:00 am
Secretary of State

03-17-2004 90009 016 ***150.00

DOCUMENT # J86634

1: Entity Name

WINDSWEPT 5, INC.



Principal Place of Business

% ANNE YATES BURST
1611 WALNUT AV
WINTER PARK FL 32789

Mailing Address

% ANNE YATES BURST
1611 WALNUT AV
WINTER PARK FL 32789

44018685



MOORE CR2E034 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-2865673**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BURST, ANNE YATES
1101 PALMER AVE
WINTER PARK FL 32789

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **BURST, ANNE YATES**
STREET ADDRESS **1101 PALMER AVE**
CITY - ST - ZIP **WINTER PARK FL**

TITLE **D** ☐ Delete
NAME **ARTMEIER, JUNE YATES**
STREET ADDRESS **8721 SW 192ND ST**
CITY - ST - ZIP **MIAMI FL**

TITLE **D** ☐ Delete
NAME **BOYNTON, PAMELA YATES**
STREET ADDRESS **2535 HIDDEN VALLEY PLACE**
CITY - ST - ZIP **LA JOLLA CA**

TITLE **D** ☐ Delete
NAME **JUNGLES, DEBRA YATES**
STREET ADDRESS **7291 S.W. 52ND COURT**
CITY - ST - ZIP **MIAMI FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

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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

[Signature]

ANNE YATES BURST 1/22/04 407/644-5669

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #