

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Feb 28, 2001 8:00 am
Secretary of State

02-28-2001 90020 002 ***150.00

DOCUMENT # K87056**1. Entity Name**
WINSTON TRAILS DEVELOPMENT CORP.**Principal Place of Business****1725 SIDEWINDER DR**
STE 1000
PALM CITY UT 84060
US**Mailing Address****1725 SIDEWINDER DR**
STE 1000
PALM CITY UT 84060
US**2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **36-3646588**Applied For
Not Applicable**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required****6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****CT CORPORATION SYSTEM**
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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.**SIGNATURE** _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE**9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.** ☐
(See criteria on back)**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	PTD			
	REINSORF, JERRY M.	1725 SIDEWINDER DRIVE, #1000	PARK CITY UT 84060	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

	VSD			<input type="checkbox"/> Delete
	JUDELSON, ROBERT A	1725 SIDEWINDER DRIVE, #1000	PARK CITY UT 84060	

				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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	AS			<input type="checkbox"/> Delete
	PENNER, GERALD M.	525 W. MONROE STREET #1600	CHICAGO IL 60661	

				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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	AS			<input checked="" type="checkbox"/> Delete
	CHANESS, LARRY	1725 SIDEWINDER DRIVE, #1000	PARK CITY UT 84060	

				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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				<input type="checkbox"/> Delete
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	Vice President			<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
	James O'Brien	1725 Sidewinder Dr #1000	Park City, UT 84060		

				<input type="checkbox"/> Delete
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				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.**SIGNATURE:** _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/01 (435) 645-7758
Date Daytime Phone #

CR2ED34 (10/00)