2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2004
Secretary of State

DOCUMENT# L10626

Entity Name: WINCHESTER COMPUTER RESOURCES, INC.

Current Principal Place of Business:

1325 BEVILLE RD
DAYTONA BEACH, FL 32119

New Principal Place of Business:

Current Mailing Address:

555 W GRANADA BLVD #G-10
ORMOND BEACH, FL 32174

New Mailing Address:

555 W GRANADA BLVD
STE E-9
ORMOND BEACH, FL 32174

FEI Number: 59-2965040 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DALE ABBOTT CPA
555 W GRANADA BLVD #G-10
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

DALE J, ABBOTT CPA
555 W GRANADA BLVD
STE E-9
ORMOND BEACH, FL 32174 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: DALE J ABBOTT CPA 03/16/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: WINCHESTER, ROBERT S, COTT
Address: 2 WALNUT COURT
City-St-Zip: ORMOND BEACH, FL

Title: VD ( ) Delete
Name: WINCHESTER, ALICE FR, EY
Address: 2 WALNUT COURT
City-St-Zip: ORMOND BEACH, FL

Title: STD ( ) Delete
Name: WINCHESTER, HENRY CL, ARK
Address: 110 MITCHELL PLACE
City-St-Zip: DAYTONA BEACH, FL 32118

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 S WINCHESTER P 03/16/2004
Electronic Signature of Signing Officer or Director Date