

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M33247

Entity Name: WINNERS CHOICE, INC.

FILED  
Apr 23, 2009  
Secretary of State

## Current Principal Place of Business:

4401 NW 124 AVE  
CORAL SPRINGS, FL 33065

## New Principal Place of Business:

318 INDIAN TRACE  
SUITE 703  
WESTON, FL 33326

## Current Mailing Address:

4401 NW 124 AVE  
CORAL SPRINGS, FL 33065

## New Mailing Address:

318 INDIAN TRACE  
SUITE 703  
WESTON, FL 33326

FEI Number: 59-2685715

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BROWN, GARY  
4401 NW 124 AVE  
CORAL SPRINGS, FL 33065 US

## Name and Address of New Registered Agent:

BROWN, GARY  
318 INDIAN TRACE  
SUITE 703  
WESTON, FL 33326 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: GARY BROWN

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BROWN, GARY  
Address: 4401 NW 124 AVE  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: PTS ( ) Delete  
Name: BROWN, GARY  
Address: 4401 NW 124 AVE  
City-St-Zip: CORAL SPRINGS, FL 33065

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: BROWN, GARY  
Address: 318 INDIAN TRACE #703  
City-St-Zip: WESTON, FL 33326

Title: PTS (X) Change ( ) Addition  
Name: BROWN, GARY  
Address: 318 INDIAN TRACE #703  
City-St-Zip: WESTON, FL 33326

I hereby certify that the information supplied with this filing does not qualify 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: GARY BROWN

D

04/23/2009

Electronic Signature of Signing Officer or Director

Date