FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 06 1998 8:00am

Secretary of State

☐ Change

Addition

Secretary of State DIVISION OF CORPORATIONS

M51679 DOCUMENT # WINDSOR FINANCIAL CORPORATION OF FLORIDA

Principal Place of Business Mailing Address 5100 N OCEANBLVD 5100 N. OCEAN BLVD SUITE 911 SUITE #911 FT.LAUDERDALE FL 33308-3012 FT. LAUDERDALE FL 33308-3012 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/05/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2796181 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PENTA, JAMES A. 81 Name 5100 N. OCEAN BLVD. Street Address (P.O. Box Number is Not Acceptable) SUITE 911 FT. LAUDERDALE FL 33308 83 84 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered change was authorized by the corporation's board of directors. I hereby accept the appointment as registered 11. Pursuant to the provisions of Sections 60 office or registered age t, or both, in the of Horida. Such change was authorized by the corporation ations of, Section 607, 365, Florida Statutes. SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13 TITLE DELETE 1.1 TITLE Change Addition PENTA, JAMES A. NAME 1.2 NAME 5100 N. OCEAN BLVD, SUITE 911 STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DVPS DELETE TOLF 2.1 TITLE Change Addition PENTA, MARIE A. NAME 2.2 NAME 5100 N. OCEAN BLVD, SUITE 911 STREET ADDRESS 2.3 STREET ADDRESS FT. LAUDERDALE FL. CITY-ST-ZIP 2.4 CITY - ST - ZIP DC DELETE TITLE 3.1 TITLE ☐ Change Addition PENTA, KIM M NAME 3.2 NAME **46 AMBERWOOD DRIVE** STREET ADDRESS 3.3 STREET ADDRESS WINCHESTER MA CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 City - St - 7/P DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. Thereby 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 annual report or supplemental annual report is from an 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 of the co officer or director of the corporation or the receiver Block 12 or Block 13 if changed, or un an attachm Block 12 or Block 13 if char

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS 6.4 City - St - 7iP

6.1 TITLE

6.2 NAME

DELETE