## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M51679

FILED May 06, 2005 Secretary of State

Entity Name: WINDSOR FINANCIAL CORPORATION OF FLORIDA

Current Principal Place of Business:		New Principal Place of Business:		
5100 N OC SUITE 911	CEANBLVD			
FT.LAUDE	ERDALE, FL 3	333083012		
Current Mailing Address:		New Mailing Address:		
5100 N. O SUITE #91	CEAN BLVD			
		333083012 US		
El Number	: 59-2796181	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:
SUITE 911	CEAN BLVD.	22200 110		
I. LAUD		33300 03		
-				
	named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
n the State	e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
n the State	e of Florida. ´ RE:	submits this statement for the		ed office or registered agent, or both,  Date
n the State SIGNATUI n accordan	e of Florida.  RE: Electro  ce with s. 607.19	nic Signature of Registered Ag 93(2)(b), F.S., the corporation did n	ent	
n the State SIGNATUI n accordan Election Cai	e of Florida.  RE: Electro  ce with s. 607.19	nic Signature of Registered Ag 33(2)(b), F.S., the corporation did n g Trust Fund Contribution ().	ent ot receive the prior notice.	
n the State BIGNATUI  n accordan Election Car  DFFICER: Vitle: Vame: Address:	e of Florida.  RE: Electro  ce with s. 607.19 mpaign Financin S AND DIREC  DPC ( PENTA, JAME: 5100 N. OCEA	nic Signature of Registered Ag 93(2)(b), F.S., the corporation did n g Trust Fund Contribution ( ). CTORS:	ent ot receive the prior notice.	Date
n the State SIGNATUI n accordan Election Cai	e of Florida.  RE: Electro  ce with s. 607.19 mpaign Financin S AND DIREC  DPC ( PENTA, JAME: 5100 N. OCEA FORT LAUDEF  VPD ( PENTA, KIM M 5100 N OCEAR	nic Signature of Registered Ag  33(2)(b), F.S., the corporation did n  g Trust Fund Contribution ( ).  CTORS:  ) Delete S A., N BLVD, SUITE 911  RDALE, FL 333083012  ) Delete	ent ot receive the prior notice.  ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: EILEEN H. PENTA STD 05/06/2005