2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008
Secretary of State

DOCUMENT# N05000006933

Entity Name: WINDS OF FIRE, INC.

Current Principal Place of Business:

5243 LIDO STREET
ORLANDO, FL 32807

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 374992
ORLANDO, FL 32857

New Mailing Address:

P.O. BOX 574992
ORLANDO, FL 32857

FEI Number: 20-3154470 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SULLIVENT, VIRGINIA
5243 LIDO STREET
ORLANDO, FL 32807 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: SULLIVENT, VIRGINIA
Address: 5243 LIDO STREET
City-St-Zip: ORLANDO, FL 32807

Title: DV ( ) Delete
Name: BRALAND, BRAD
Address: 7918 ROSE AVE
City-St-Zip: ORLANDO, FL 32810

Title: D ( ) Delete
Name: BRALAND, BRIDGETT
Address: 7918 ROSE AVE
City-St-Zip: ORLANDO, FL 32810

Title: DS ( ) Delete
Name: PALMER, KARIN
Address: 300 LOG RUN CT
City-St-Zip: OCOEE, FL 34761

Title: D ( ) Delete
Name: JOBE, MARK
Address: 10563 EAST 46TH TERRACE
City-St-Zip: KANSAS CITY, MO 64133

Title: D ( ) Delete
Name: JOBE, BRENDA
Address: 10563 EAST 46TH TERRACE
City-St-Zip: KANSAS CITY, MO 64133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: BRALAND, BRAD
Address: 7918 ROSE AVE
City-St-Zip: ORLANDO, FL 32810

Title: DS (X) Change ( ) Addition
Name: BRALAND, BRIDGETT
Address: 7918 ROSE AVE
City-St-Zip: ORLANDO, FL 32810

Title: D (X) Change ( ) Addition
Name: PALMER, KARIN
Address: 300 LOG RUN CT
City-St-Zip: OCOEE, FL 34761

Title: DV (X) Change ( ) Addition
Name: JOBE, MARK
Address: 8700 HOLMES, APARTMENT 305
City-St-Zip: KANSAS CITY, MO 64131

Title: D (X) Change ( ) Addition
Name: JOBE, BRENDA
Address: 8700 HOLMES, APARTMENT 305
City-St-Zip: KANSAS CITY, MO 64131

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VIRGINIA SULLIVENT DP 04/14/2008

Electronic Signature of Signing Officer or Director — Date