## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000006673

Entity Name: WINDMILL STABLES, INC.

FILED Jul 26, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2600 WINDMILL RANCH RD WESTON, FL 33331 **Current Mailing Address: New Mailing Address:** 2600 WINDMILL RANCH RD WESTON, FL 33331 FEI Number: 65-0963224 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: MCGLINCHEY, SHARON SADOWSKI, SCOTT J 4517 SW 34TH TERRACE 2770 STIRRUP LANE FORT LAUDERDALE, FL 33312 US US WESTON, FL 33331 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: SCOTT J SADOWSKI 07/26/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition BRAUN, DAVID Name: Name: 1601 N PALM AVE, SUITE 301 Address: Address: City-St-Zip: PEMBROKE PINES, FL 33026 City-St-Zip: Title: Title: (X) Delete () Change () Addition MAY, FRANK Name: Name: Address: 1601 N PALM AVE. SUITE 301 Address: City-St-Zip: PEMBROKE PINES, FL 33026 City-St-Zip: Title: (X) Delete Title: () Change () Addition ABBATE, FLORIO Name: Name: 13925 NW 60TH AVE Address: Address: City-St-Zip: MIAMI LAKES, FL 33014 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: MARINO, DAN Name: Address: 3415 STALLION LN Address: City-St-Zip: WESTON, FL 33331 City-St-Zip: Title: (X) Delete Title: () Change () Addition MCGLINCHEY, SHARON Name: Name: 4517 SW 34TH TERRACE Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition SADOWSKI, SCOTT J SADOWSKI, SCOTT J Name: Name: Address: 2770 STIRRUP LANE Address: 2770 STIRRUP LANE WESTON, FL 33331 WESTON, FL 33331 City-St-Zip: 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCOTT J SADOWSKI P 07/26/2004