2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000054470

1. Entity Name
GULFWINDS CONSTRUCTION AND RENOVATION, INC.

Principal Place of Business	Mailing Address
345 BROOKS ST., SE	345 BROOKS ST., SE
FT WALTON BEACH, FL 32548	FT WALTON BEACH, FL 32548

DO NOT WRITE IN THIS SPACE

04202005   No Chg-P   CR2E034 (10/03)

4. FEI Number		Applied For
59-3649964		Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WOMBLE, STEPHEN C
345 BROOKS ST., SE
FT WALTON BEACH, FL 32548

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2005 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	U00000325548 04/23/05-20021-005 150.00

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	WOMBLE, STEPHEN C
STREET ADDRESS	345 BROOKS ST., SE
CITY-ST-ZIP	FT WALTON BEACH, FL 32548
TITLE	ST
NAME	ROZAR, SHIRLEY JO
STREET ADDRESS	345 BROOKS STREET, SE
CITY-ST-ZIP	FORT WALTON BEACH, FL 32548
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby 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 report or supplemental report is true and 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stephen C Womble Stephen C. Womble   4/20/05   850 2434970

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #