


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000100448	
1. Entity Name WENDOVER GP, INC.	

Principal Place of Business 615 CRESCENT EXECUTIVE CT, SUITE 120 LAKE MARY, FL 32746	Mailing Address 615 CRESCENT EXECUTIVE CT, SUITE 120 LAKE MARY, FL 32746
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04132006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3679951	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent GRAY, N DWAYNE JR GREENSPOON, MARDER ET AL 201 EAST PINE STREET SUITE 500 ORLANDO, FL 32801

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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000542619 05/10/06-00106-003 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DPS WOLF, JONATHAN 615 CRESCENT EXECUTIVE CT. STE 120 LAKE MARY, FL 32746
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DVPT BORCK, TODD 615 CRESCENT EXECUTIVE CT. STE 120 LAKE MARY, FL 32746
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 	4/26/06 (407) 333-1440
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date Daytime Phone #</small>