

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000070504

FILED
Jul 02, 2007
Secretary of State

Entity Name: WESTWIND MORTGAGE CORPORATION

Current Principal Place of Business:

P.O. BOX 7338
ST. PETERSBURG, FL 33734 US

New Principal Place of Business:

165 RAMON WAY NE
ST. PETERSBURG, FL 33704 US

Current Mailing Address:

P.O. BOX 7338
ST. PETERSBURG, FL 33734 US

New Mailing Address:

FEI Number: 59-3732411 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEELE, J. R
165 RAMON WAY NE
ST. PETERSBURG, FL 33704 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: STEELE, J. R
Address: 165 RAMON WAY NE
City-St-Zip: ST. PETERSBURG, FL 33704 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: STEELE, J.
Address: 165 RAMON WAY NE
City-St-Zip: ST. PETERSBURG, FL 33704 US

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

SIGNATURE: J. STEELE

PRES

07/02/2007

Electronic Signature of Signing Officer or Director

_____ Date