

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 16, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # P02000032479

1. Entity Name  
WENDOVER FLORIDA, INC.



Principal Place of Business  
1275 LAKE HEATHROW LANE  
SUITE 115  
HEATHROW, FL 32746

Mailing Address  
1275 LAKE HEATHROW LANE  
SUITE 115  
HEATHROW, FL 32746



01312008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 04-3633940	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

N. DWAYNE GRAY, JR.  
201 EAST PINE STREET  
SUITE 500  
ORLANDO, FL 32801

**DO NOT WRITE  
IN THIS SPACE**

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS BORCK, TODD L 615 CRESCENT EXECUTIVE CT, STE 120 LAKE MARY, FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT WOLF, JONATHAN L 1275 LAKE HEATHROW LANE SUITE 115 HEATHROW, FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LAW, PATRICK E 615 CRESCENT EXECUTIVE COURT, STE 120 LAKE MARY, FL 32746
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 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/8

Date

407 333 1440

Daytime Phone #