

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000025698

Entity Name: WINDOR SOUTH, INC.

FILED
Aug 31, 2005
Secretary of State

Current Principal Place of Business:

5519 COMMERCE DRIVE
UNIT # 7
ORLANDO, FL 32839

New Principal Place of Business:

2828 STATES STREET
LAKELAND, FL 33803

Current Mailing Address:

5519 COMMERCE DRIVE
UNIT # 7
ORLANDO, FL 32839

New Mailing Address:

2828 STATES STREET
LAKELAND, FL 33803

FEI Number: 56-2325537

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUVAL, MICHAEL E
5519 COMMERCE DRIVE
UNIT # 7
ORLANDO, FL 32839 US

Name and Address of New Registered Agent:

CVERCKO, ALEXANDER B
111 NORTH ORANGE AVE.
SUITE #950
ORLANDO, FL 32801 US

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: ALEXANDER CVERCKO

08/31/2005

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: PSTD () Delete
Name: DUVAL, MICHAEL E
Address: 5519 COMMERCE DRIVE UNIT # 7
City-St-Zip: ORLANDO, FL 32839

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: DUVAL, BARBARA T
Address: 2828 STATES STREET
City-St-Zip: LAKELAND, FL 33803

Title: VP () Change (X) Addition
Name: DUVAL, EDWARD W
Address: 2828 STATES STREET
City-St-Zip: LAKELAND, FL 33803

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

SIGNATURE: BARBARA DUVAL

VP

08/31/2005

Electronic Signature of Signing Officer or Director

Date