

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000081323

FILED  
Mar 19, 2007  
Secretary of State

Entity Name: TRADEWINDS OF Mandalay, INC.

## Current Principal Place of Business:

14014 W. OZELLO TRAIL  
CRYSTAL RIVER, FL 34429

## New Principal Place of Business:

825 N. CITRUS AVE.  
CRYSTAL RIVER, FL 34429

## Current Mailing Address:

3824- N. STIRRUP DR.  
BEVERLY HILLS, FL 34465

## New Mailing Address:

FEI Number: 11-3702297      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STILLWELL, CLARK A ESQ  
320 US HWY 41  
INVERNESS, FL 34450      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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: GEE, WILLIAM  
Address: 3824 N. STIRRUP DR.  
City-St-Zip: BEVERLY HILLS, FL 34465

Title: D ( ) Delete  
Name: GEE, GAIL  
Address: 3824 N. STIRRUP DR.  
City-St-Zip: BEVERLY HILLS, FL 34465

Title: D ( ) Delete  
Name: STILLWELL, CLARK A  
Address: 320 US HWY 41  
City-St-Zip: INVERNESS, FL 34450

Title: D ( ) Delete  
Name: GEE, GAIL  
Address: 3824 N. STIRRUP DR.  
City-St-Zip: BEVERLY HILLS, FL 34465 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GAIL GEE

D

03/19/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date