

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000092055

Entity Name: WINCOY, INC.

FILED
Feb 24, 2005
Secretary of State

Current Principal Place of Business:

5840 KEYSTONE ROAD
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

5840 KEYSTONE ROAD
PENSACOLA, FL 32504

New Mailing Address:

FEI Number: 20-0171669

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

INCORPORATE USA, INC.
3150 SANDY RIDGE DR
CLEARWATER, FL 33761 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: P () Delete
Name: FOSTER, TIKI
Address: 5840 KEYSTONE RD
City-St-Zip: PENSACOLA, FL 32504

Title: VPST () Delete
Name: FOSTER, BRIDGETTE
Address: 5840 KEYSTONE RD
City-St-Zip: PENSACOLA, FL 32504

Title: D () Delete
Name: FOSTER, COYAN D
Address: 5840 KEYSTONE RD
City-St-Zip: PENSACOLA, FL 32504

Title: D () Delete
Name: FOSTER, WINSTON H
Address: 5840 KEYSTONE RD
City-St-Zip: PENSACOLA, FL 32540

Title: D () Delete
Name: FOSTER, DUANE O
Address: 5840 KEYSTONE RD
City-St-Zip: PENSACOLA, FL 32504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FOSTER, DUANE O
Address: 5840 KEYSTONE RD
City-St-Zip: PENSACOLA, FL 32504

Title: VPS (X) Change () Addition
Name: FOSTER, COYAN D SNR
Address: 5840 KEYSTONE RD
City-St-Zip: PENSACOLA, FL 32504

Title: D (X) Change () Addition
Name: FOSTER, COYAN D SNR
Address: 5840 KEYSTONE RD
City-St-Zip: PENSACOLA, FL 32504

Title: D (X) Change () Addition
Name: FOSTER, DUANE O
Address: 5840 KEYSTONE RD
City-St-Zip: PENSACOLA, FL 32540

Title: T (X) Change () Addition
Name: FOSTER, BRIDGETTE E
Address: 5840 KEYSTONE RD
City-St-Zip: PENSACOLA, FL 32504

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: BRIDGETTE FOSTER

T

02/24/2005

Electronic Signature of Signing Officer or Director

Date