

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000096943

Entity Name: OLDE FLORIDA FINE ART, INC.

FILED
Feb 13, 2006
Secretary of State

Current Principal Place of Business:

6708 BENJAMIN ROAD SUITE 800
TAMPA, FL 33634

New Principal Place of Business:

13499 CLEVELAND AVE. S.E.
#121
FT. MYERS, FL 33907

Current Mailing Address:

6708 BENJAMIN ROAD SUITE 800
TAMPA, FL 33634

New Mailing Address:

1068 BUSINESS LANE
#1
NAPLES, FL 34110

FEI Number: 20-0287570

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESQUIVEL, JULIO C ESQ
101 E KENNEDY BLVD SUITE 2800
TAMPA, FL 33602 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: CHMN () Delete
Name: WINDFELDT, GENE
Address: 139 BAREFOOT CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34134

Title: PRES () Delete
Name: WINDFELDT, MICHAEL
Address: 11027 BLAINE TOP PLACE
City-St-Zip: TAMPA, FL 33626

Title: T () Delete
Name: WINDFELDT, GREGORY
Address: 139 BAREFOOT CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PRES (X) Change () Addition
Name: WINDFELDT, MICHAEL
Address: 20100 EAGLE GLEN WAY
City-St-Zip: ESTERO, FL 33928

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: MICHAEL WINDFELDT

PRES

02/13/2006

Electronic Signature of Signing Officer or Director

Date