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FILED
May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P03644 (2)
1. Corporation Name
REGENCY WINDSOR CAPITAL, INC.



Principal Place of Business

Mailing Address

1025 FLAMEVINE LANE #1-5
VERO BCH. FL 32963

1025 FLAMEVINE LANE #1-5
VERO BCH. FL 32963

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/09/1984	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 37-1140508	
22	City & State	27	City & State	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAMBERT, ROY H.
1025 FLAMEVINE LANE
SUITE 1-4
VERO BEACH FL 32963

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CD	1.1 TITLE	PD
NAME	LAMBERT, ROY H.	1.2 NAME	PURDIE, JOHN A.
STREET ADDRESS	1025 FLAMEVINE LANE	1.3 STREET ADDRESS	8500 KEYSTONE CROSSING, SUITE 530
CITY-ST-ZIP	VERO BEACH FL	1.4 CITY-ST-ZIP	INDIANAPOLIS, IN 46240
TITLE	SD	2.1 TITLE	VD
NAME	BROWN, RONALD E.	2.2 NAME	WIMPY, F. RONALD
STREET ADDRESS	1025 FLAMEVINE LANE	2.3 STREET ADDRESS	1025 FLAMEVINE LANE, SUITE 3
CITY-ST-ZIP	VERO BEACH FL	2.4 CITY-ST-ZIP	VERO BEACH, FL 32963
TITLE	VD	3.1 TITLE	VD
NAME	THOMPSON, JAMES	3.2 NAME	MURRAY, ROBERT H.
STREET ADDRESS	1025 FLAMEVINE LANE	3.3 STREET ADDRESS	1025 FLAMEVINE LANE, SUITE 3
CITY-ST-ZIP	VERO BEACH FL	3.4 CITY-ST-ZIP	VERO BEACH, FL 32963
TITLE	TD	4.1 TITLE	
NAME	LOHUIS, NEAL R.	4.2 NAME	
STREET ADDRESS	1025 FLAMEVINE LANE	4.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL	4.4 CITY-ST-ZIP	
TITLE	VD	5.1 TITLE	
NAME	LAMBERT, PHILIP A.	5.2 NAME	
STREET ADDRESS	1025 FLAMEVINE LANE	5.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL	5.4 CITY-ST-ZIP	
TITLE	VD	6.1 TITLE	
NAME	LAMBERT, ROY H. JR.	6.2 NAME	
STREET ADDRESS	1025 FLAMEVINE LANE	6.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BCH. FL	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, on an attachment with an address.

SIGNATURE

CR2E034 (10/97)