2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State
04-25-2005 90259 040 ***150.00

DOCUMENT # P03644

1. Entity Name
REGENCY WINDSOR CAPITAL, INC.

Principal Place of Business	Mailing Address
1025 FLAMEVINE LANE #1-5 SUITE 3 VERO BCH., FL 32963	1025 FLAMEVINE LANE #1-5 SUITE 3 VERO BCH., FL 32963

01142005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
1101 18TH PLACE	P.O. BOX 1477
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: VERO BEACH, FL	City & State: VERO BEACH, FL
Zip: 32960 Country: USA	Zip: 32961 Country: USA

4. FEI Number 37-1140508 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LAMBERT, ROY H. 1025 FLAMEVINE LANE SUITES 1-4 VERO BEACH, FL 32963	Name: LAMBERT, ROY H. Street Address (P.O. Box Number is Not Acceptable): 1101 18TH PLACE City: VERO BEACH FL Zip Code: 32960

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PURDIE, JOHN A 8500 KEYSTONE CROSSING, STE 530 INDIANAPOLIS, IN 46240	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD LAMBERT, ROY H 1025 FLAMEVINE LANE, SUITE 3 VERO BEACH, FL 32963	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD LAMBERT, ROY H. 1101 18TH PLACE VERO BEACH, FL 32960	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WIMPY, RON 1025 FLAMEVINE LANE, SUITE 3 VERO BEACH, FL 32963	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WIMPY, RON 1101 18TH PLACE VERO BEACH, FL 32960	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WIMPY, RON 1025 FLAMEVINE LANE, SUITE 3 VERO BEACH, FL 32963	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LOHUIS, NEAL R. 1101 18TH PLACE VERO BEACH, FL 32960	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LAMBERT, PHILIP A. 1025 FLAMEVINE LANE, SUITE 3 VERO BEACH, FL 32963	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LAMBERT, PHILIP A. 1101 18TH PLACE VERO BEACH, FL 32960	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LAMBERT, ROY H. JR. 1025 FLAMEVINE LANE, SUITE 3 VERO BEACH, FL 32963	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LAMBERT, ROY H., JR. 1101 18TH PLACE VERO BEACH, FL 32960	☒ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Neal R. Lohuis, Treas. 4/21/05 (772) 778-8240
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #