

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000082724

FILED
Apr 30, 2005
Secretary of State

Entity Name: TRADEWINDS CONTRACTING, INC.

Current Principal Place of Business:

10100 N. OLD PALAFAX
UNIT 3
PENSACOLA, FL 32534

New Principal Place of Business:

10100 N. PALAFOX ST.
UNIT 3
PENSACOLA, FL 32534

Current Mailing Address:

10100 N. OLD PALAFAX
UNIT 3
PENSACOLA, FL 32534

New Mailing Address:

10100 N. PALAFOX ST.
UNIT 3
PENSACOLA, FL 32534

FEI Number: 20-1185579

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

L. PAUL SIRMANS, P.A.
385 HWY 98 EAST
220
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

RICHARD B. METZ
10100 N. PALAFOX ST.
UNIT 3
PENSACOLA, FL 32534 US

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: RICHARD B. METZ

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOULTON, GREGORY F
Address: 4760 BAYWIND DR.
City-St-Zip: PENSACOLA, FL 32514

Title: V () Delete
Name: METZ, RICHARD B
Address: 10425 WORTH CT.
City-St-Zip: PENSACOLA, FL 32514

Title: ST () Delete
Name: MAJORS, WESLEY P
Address: P.O. BOX 290
City-St-Zip: CANTONMENT, FL 32533

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:

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: RICHARD B METZ

VP

04/30/2005

Electronic Signature of Signing Officer or Director

Date