


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2008 8:00 am
Secretary of State

07-07-2008 90001 043 ***155.00

DOCUMENT # P07000127024	
1. Entity Name W. E. WINDERWEEDLE, JR., P. A.	

Principal Place of Business 219 W. COMSTOCK AVENUE WINTER PARK, FL 32789	Mailing Address 219 W. COMSTOCK AVENUE WINTER PARK, FL 32789
--	--

40109593



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

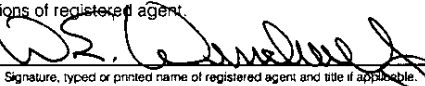
07022008 Chg-P CR2E034 (12/06)

4. FEI Number 26-1492070	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	---------------------------------------

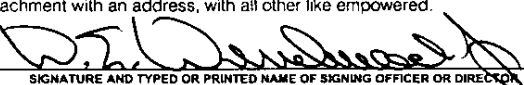
6. Name and Address of Current Registered Agent WINDERWEEDLE, W E JR. 219 W. COMSTOCK AVENUE WINTER PARK, FL 32789	
---	--

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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 7-7-08
(NOTE: Registered Agent signature required when reinstating)	

FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/>	\$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 WINDERWEEDLE, W E JR. 219 W. COMSTOCK AVENUE WINTER PARK, FL 32789 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 	DATE 7-2-08 407 628-4040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	

This instrument was prepared by,
Please record and return to:
W. E. Winderweedle, Jr
PO Box 2997
Winter Park, Florida 32789

ATTACHMENT

40109593
D67000127024

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF ORANGE

The Undersigned, **W. E. WINDERWEEDLE, JR** deposes and says:

That W. E. Winderweedle, Jr PA was incorporated on November 29, 2007

That this 2008 year is the first year of incorporation

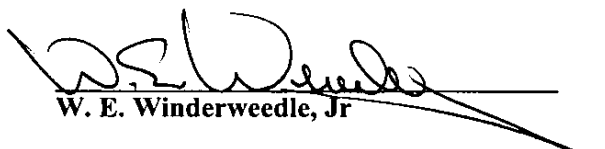
That the Notice of Intent to Dissolve was first correspondence received by this office on July 2, 2008 and no other invoices or notices have been received from the Florida Department of State prior to this date.

That waiving the \$400 late fee is requested.

All documents attached here to are as follows:

Notice of Intent to Dissolve
Executed 2008 For Profit Corporation Annual Report

FURTHER AFFIANT SAITH NAUGHT.


W. E. Winderweedle, Jr

Sworn to and subscribed and acknowledged before me this 2 day of July, 2008 by W E Winderweedle, Jr, who is personally known to me or who produced _____ as identification.




Notary Public

My commission expires: