

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2005 8:00 am**  
**Secretary of State**

04-25-2005 90259 031 \*\*\*150.00

**DOCUMENT # P09415**

1. Entity Name  
**REGENCY WINDSOR DEVELOPMENT, INC.**



Principal Place of Business  
**1025 FLAMEVINE LANE  
S-3  
VERO BEACH, FL 32963**

Mailing Address  
**1025 FLAMEVINE LANE  
S-3  
VERO BEACH, FL 32963**

2. Principal Place of Business  
**1101 18TH PLACE  
Suite, Apt. #, etc.**

3. Mailing Address  
**P.O. BOX 1477  
Suite, Apt. #, etc.**

City & State  
**VERO BEACH, FL**

City & State  
**VERO BEACH, FL**

01142005 Chg-P CR2E034 (10/03)



4. FEI Number  
**37-0897999**

Applied For  
Not Applicable

Zip  
**32960**

Country  
**USA**

Zip  
**32961**

Country  
**USA**

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

**6. Name and Address of Current Registered Agent**

**LAMBERT, ROY H. JR.  
1025 FLAMEVINE LANE  
S-3  
VERO BEACH, FL 32963**

**7. Name and Address of New Registered Agent**

Name  
**LAMBERT, ROY H., JR.**  
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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**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**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
LAMBERT, ROY H. JR.  
1025 FLAMEVINE LANE, SUITE 3  
VERO BEACH, FL 32963 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
LAMBERT, PHILIP A.  
1025 FLAMEVINE LANE, SUITE 3  
VERO BEACH, FL 32963 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TD  
LOHUIS, NEAL  
1025 FLAMEVINE LANE, SUITE 3  
VERO BEACH, FL 32963 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CD  
LAMBERT, ROY H.  
1025 FLAMEVINE LANE, SUITE 3  
VERO BEACH, FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
LAMBERT, ROY H., JR.  
1101 18TH PLACE  
VERO BEACH, FL 32960 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
LAMBERT, PHILIP A.  
1101 18TH PLACE  
VERO BEACH, FL 32960 ☒ Change ☐ Addition

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  
CD  
LAMBERT, ROY H.  
1101 18TH PLACE  
VERO BEACH, FL 32960 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ 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* Neal R. Lohuis, Treas. 4/24/05

(772) 778-8240

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #