


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 12, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000011184 1. Entity Name WINTMART REALTY CORP.		
Principal Place of Business 200 WEST FORSYTH STREET SUITE 1600 JACKSONVILLE, FL 32202	Mailing Address 275 MADISON AVENUE 30TH FLOOR NEW YORK, NY 10016 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent HOUSTON, CLARENCE H JR 200 WEST FORSYTH STREET SUITE 1600 JACKSONVILLE, FL 32202		DO NOT WRITE IN THIS SPACE
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ Signature, typed or printed name of registered agent and title if applicable		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HOUSTON, CLARENCE H JR 200 W. FORSYTH ST.#1600 JACKSONVILLE, FL 32202	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP FORGASH, JACK 275 MADISON AVE., 30TH FLOOR NEW YORK, NY	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST FORGASH, ELLIOTT 275 MADISON AVE, 30TH FLOOR NEW YORK, NY	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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: <u><i>Elliott Forgas</i></u> <u><i>Elliott Forgas</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		<u><i>1/6/04</i></u> Date <u><i>212490050</i></u> Daytime Phone #



01082004 No Chg-P CR2E034 (10/03)

4. FEI Number
13-3711031

Applied For
Not Applicable

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

U00000002572
01/13/04-80020-008 150.00

**DO NOT WRITE
IN THIS SPACE**