FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 28 1997 8:00am Secretary of State

DOCUMENT #	P93000057366	(5)
1 Corporation Name		

WINDIGO INVESTMENTS, INC.

Principal Place of Business Mailing Address				ESTEI DIAM I	JOSO SILITE ORAL	1 4			
440 ROYAL PALM WAY 440 ROYAL PALI SUITE 200 SUITE 200		440 ROYAL PALM WAY Suite 200 Palm Beach Fl 33480-							
						3. Date Incorporated or Qualified 08/16/1993		e of Last Ro 10/1996	eport
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		Ap	pplied For
21	A. A.S.A.	26				65-0436353			ot Applicable
Suite, Apt		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A	
C:ly & State	е	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip	Country Zip Country			8. This corporation has liability for it	ntangible t				
24	25	29	30			Florida Statutes X Yes No			
	9. Name and Address of Curr	ent Registered Agent		· · · ·		10. Name and Address of New Reg	istered A	gent	
)PIN, L. FRANK		81	1	Name				
)PIN, MILLER & YUDENFREUN ROYAL PALM WAY, STE 200	D	82	2	Street Addre	ss (P.O. Box Number is Not Acceptab	e)		
	M BEACH FL 33480		83	,					
			84	-	City		FI	85 Zip (Code
11. Pursuani t	to the provisions of Sections 607.0	502 and 607 1508, Florida Stat	utes, the abov	/ 0 -I	named corpo	ration submits this statement for the p	irpose of	1 1 changing it	s registered
office or re agent. Far	egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such change was ligations of Section 607,0505-1	s authorized b Florida Statute	y t	the corporation	on's board of directors. I hereby accep	t the appo	intment as	registered
SIGNATURE			70.100 014.0.0						
SIGNATION	Signal exity you or printed name of regetered.	agent and title if applicable. (No	OTE: Registered Ag	jeni	I signature required	when reinstating)	DATE		
12.		IND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	PSD	☐ DELETE	1.1 TITLE				!	L Change	Addition
NAME	CHOPIN, L. FRANK		1.2 NAME						
STREET ADDRESS	440 ROYAL PALM WAY, STE	: 200	1.3 STREE	T AI	JDDRESS				
CITY - ST - 7IP	PALM BEACH FL		1.4 CITY-	\$1-	- ZIP				
TIFLE		L DELETE	2.1 TITLE				ı	Change	Addition
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREET						
CITY-ST-ZIP		Dr. CTC	2. 4 CITY-	Sī	-ZIP			T & .	1.4.000
TITLE		DELETE	3.1 TITLE				ı	Change	Addition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE						
CITY-ST-ZIP		DELETE	3.4. CITY+	ST-	- ZIP			Change	Addition
TITLE NAME		T OFFEIE	4.1 TITLE				ı	Change	Addition
			4. 2 NAME						
STREET ADORESS			4.3 STREE		**				
CITY - ST - ZIP TITLE		DELETE	4.4 CITY - I	51-	-ZIP			☐ Change	☐ Addition
NAME							'	Change	Audition
			5.2 NAME		innecee				
STREET ADDRESS			5.3 STREE						
CITY+ST-ZIP TITLE		DELETE	5.4 CITY-!	51-	·ZIP			Change	Addition
NAME		ניין טנינכונ	6.1 TITLE				'	— Charige	LI VOULION
STREET ADDRESS			6.2 NAME		poncee				
			6.3 STREET						
14. I do hereb	ov certify that the information along	led with this filing does and hus	6.4 CITY-:	si- em	notion stated	in Section 119 07(3)(i). Florida Statutos	Lighter	certify that	the
information Fam an of appears in	n indicated on this artifal/eport of ficer or director of the composition n Block 12 or Block 13 och a had	r supplemental amulal exort is or the receiver of trustles of the Murau litectment with the	true and acc owekly dexed	cut	ate and that r	in Section 119.07(3)(i), Florida Statutes ny signature shall have the same legal as required by Chapter 607, Florida S	effect as atutes; an	if made und id that my n	der oath; that name

CICMATUDE

DON PRIMED NAME OF SIGNING DEFICER OR DIRECTOR

1-22-97

(561) 655-950(

Daytime Frone *