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Apr 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000060433 (8)

1. Corporation Name
WINDSOR INVESTMENT NETWORK, INC.



Principal Place of Business
8243 S US1
PORT SAINT LUCIE FL 34952
US

Mailing Address
8243 SOUTH US 1
PORT SAINT LUCIE FL 34952-2848
US

3. Date Incorporated or Qualified 08/25/1993
3a. Date of Last Report 02/14/1996

2. Principal Place of Business
21 8257 S US1
Suite, Apt. #, etc.
22
City & State
23 Port Saint Lucie FL
Zip Country
24 34952 25 St Lucie
2a. Mailing Address
26 8257 S US1
Suite, Apt. #, etc.
27
City & State
28 Port Saint Lucie, FL
Zip Country
29 34952 30 St Lucie

4. FEI Number 65-0506435
Applied For
Not Applicable

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

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GREENWALT, ALVIN E
2949 SE FARLEY RD
PT. ST. LUCIE FL 34952

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PO	GREENWALT, ALVIN	2949 SE FARLEY RD	PORT ST LUCIE FL	<input type="checkbox"/>
VPD	MORRIS, RAYMOND	8024 INDRIO RD #L-6	FORT PIERCE FL	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
PUP DST	Greenwalt Alvin E	2949 SE Farley Rd.	Port St Lucie FL 34952	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

Alvin E Greenwalt

CR2E034 (9/96)