

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P93000077673 (0)

1. Corporation Name

WINSTON DEVELOPMENT CORPORATION

Principal Place of Business

8000 IRONHORSE BOULEVARD  
WEST PALM BEACH FL 33412

Mailing Address

% JOSHUA A MUSS  
11781 LEE JACKSON MEM HWY. SUITE 320  
FAIRFAX VA 22033  
US



2. Principal Place of Business

21 4431 NW 63RD DR

Suite, Apt. #, etc.

22

City & State

23 COCONUT CREEK

Zip

24 33073

Country

25 FLORIDA

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

10/14/1993

3a. Date of Last Report

04/28/1995

4. FEI Number

65-0447355

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$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

GORDON, MICHAEL D  
SERVICO CENTRE SOUTH, SUITE 402  
1601 BELVEDERE ROAD  
WEST PALM BEACH FL 33406

10. Name and Address of New Registered Agent

81 Name

Joshua A. Muss

82 Street Address (P.O. Box Number is Not Acceptable)

8311 Bob-O-Link Drive

83

84 City

West Palm Beach

FL

85

33412

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

*Joshua A. Muss*

Joshua A. Muss

3/26/96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE  
NAME MUSS, JOSHUA A  
STREET ADDRESS 11781 LEE JACKSON MEMORIAL HWY., SUITE 320  
CITY-ST-ZIP FAIRFAX VA 22033-3309

TITLE ☐ DELETE  
NAME VP  
NAME WEBBER, DAVID F.  
STREET ADDRESS 8290 BOB-O-LINK DRIVE  
CITY-ST-ZIP WEST PALM BEACH FL

TITLE ☐ DELETE  
NAME ST  
NAME DENNEN, MARVIN L.  
STREET ADDRESS 11781 LEE JACKSON MEM. HWY #320  
CITY-ST-ZIP FAIRFAX VA

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 of this report or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/96

(703) 591-1881

CR2E034 (12/95)