2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000037659

1. Entity Name
WINDMAR INDUSTRIES, INC.

40046568

02192007   No Chg-P   CR2E034 (11/05)

Principal Place of Business	Mailing Address
35 FISHING VILLAGE DRIVE	24 DOCKSIDE LN, PMB 195
KEY LARGO, FL 33037 US	KEY LARGO, FL 33037 US

DO NOT WRITE IN THIS SPACE

4. FEI Number		Applied For
65-0599999		Not Applicable

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

6. Name and Address of Current Registered Agent

ELLIOT, BRUCE
22 BAYRIDGE
KEY LARGO, FL 33037

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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 _____   3-30-07

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, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution.   ☐   **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	ELLIOT, BRUCE W
STREET ADDRESS	22 BAYRIDGE
CITY-ST-ZIP	KEY LARGO, FL 33037

TITLE	V
NAME	ELLIOT, KIM F
STREET ADDRESS	22 BAYRIDGE
CITY-ST-ZIP	KEY LARGO, FL 33037

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
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CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____   3-07-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #