2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000094111 1. Entity Name WINTER HARBOUR, INC.					FILED 04 APR 28 AM II: 22				
Decide Services					<u> </u>	UM APR ZE	3 M II: 22		
Principal Place of Business 9105 OLS ST AGUSTINE RD TALLAHASSEE, FL 32311 US Mailing Address 9105 OLS ST AGUSTINE RD TALLAHASSEE, FL 32311				S	T	SECRETARY ALLAMASSE	OF STATE E. FLORIDA		
0 Dringing	0 (D)	TO Market Book And A							
Principal Place of Business Address Address									
Suite, Apit #etrandis suite, Apit #etrandis					04232004	Chg-P	CR2E034 (10/0	121	
City & Sto	4178 Apalachee Pkwy	4178 Apalachee Pkwy		⊇kwy				·	
City & State Tallahassee, FL 323 11		ার্বারিhassee, FL 323		2311	59-3351499			Applied For Not Applicable	
Zip	. Country Zip		Countr	у	5. Certificate	of Status Desired	□ \$8.75 Fee Req	Additional	
	6. Name and Address of Current R	egistered Agent			7. Name and	Address of New R		unou	
Name (To					nnah Petrandis, 77-				
PETRANDIS, JOHNNY II 9105 OLD ST.AUGUSTINE RD				Street Address (P.O. Box Nurring is Not Acceptable Pkwy.					
TALLAHA	SSEE, FL 32311				Tallahassee, FL 32311				
$\Omega\Omega$				City FL Zip Code					
8. The above	e named epitity sporpins this statement for t	he purpose of changing its r	registered	office or register	ed agent, or bot	h. in the State of Flo	FE '	1	
the obliga	tions of registered agent.			, and the second	3			ш, ши дооор,	
SIGNATURE.	Signature, typed or printed name of registered agent and	d title if applicable. (NOTE:	Registered /	Agent signature required	when reinstation)		DATE		
·		(10.00)		gon ognation required	and residing,		UNIE		
After M	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00				00 May Be ed to Fees				
10.	OFFICERS AND DI		11.	Prop Jo	ADDITIONS/	HANGES TO OFFI	CERS AND DIRECT		
TITLE Name.	PETRANDIS, JOHNNY II	☐ Delete	NAME	76				ge 🗌 Addition	
STREET ADDRESS CITY-ST-ZIP				ADORESS	 4178 Apalachee Pkwy. Tallahassee, FL 32311 				
TITLE _	TALLAHASSEE, FL 32311	□ Delete	CITY-S					pe 🔲 Addition	
NAME	PETRANDIS, JOHNNY II	LI Dolote	NAME	Tisec Jo	,	Petrandis	7		
STREET ADDRESS CITY-ST-ZIP	9105 OLS ST.AUGUSTINE RD. TALLAHASSEE, FL 32311		STREET CETY-ST	ADORESS 770			chee Pkwy		
TITLE	TALLAHASSEE, FL S2311	☐ Delete	TITLE	-ZIF		<u>lallanasse</u>	e. FL 32311 550 20 Ma	Addition	
NAME		LI Dolote	NAME		05/06	70401008	001 **1	350. 00 """	
STREET ADDRESS CITY-ST-ZIP			STREET.	ADDRESS	, Table 19, 19, 19				
TITLE		☐ Dejete	TITLE	-211			☐ Chang	e Addition	
NAME			NAME						
STREET ADORESS CITY-ST-ZIP			STREET	adoress Zip	•				
TITLE		☐ Delete	TITLE				Chang	e 🔲 Addition	
NAME STREET ADDRESS			NAME	ADDDECC			_ ·	_	
CITY-ST-ZIP	,		STREET /	I					
TITLE		☐ Delete	TITLE		• •		☐ Chang	e 🔲 Addition	
NAME STREET ADDRESS	*		NAME STREET	ADDRESS					
CITY-ST-ZIP	•		CITY-ST						
12. I hereby of indicated of the conchanged,	certify that the information supplied with in on this report or supplemental report is in poration or the receiver or trustee propowe or on an attachment with an activities, with	is filing does not qualify for the sand accurate and that my ared to execute this report as all other like empowered.	he exemp signature s required	ntion stated in Sec shall have the sa by Chapter 607,	ction 119.07(3)(i) arme legal effect Florida Statutes	, Florida Statutes. If as if made under or and that my name	urther certify that the th; that I am an offic appears in Block 10	e information er or director or Block 11 if	
SIGNATURE: 4(23/4)								;	
SIGNATURE:								· '	
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