


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2004 8:00 am
Secretary of State

04-20-2004 90020 037 ***150.00

DOCUMENT # P96000013363 1. Entity Name WINDSOR GROUP, INC.	
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Principal Place of Business 3299 NW 2 AVE #200 BOCA RATON FL 33431 US	Mailing Address P.O. BOX 811135 BOCA RATON FL 33481-135 US
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24049014



MOORE CR2E034 (11/03)

2. Principal Place of Business 7999 N. Federal Hwy Suite, Apt. #, etc. Ste 202	3. Mailing Address P.O. Box 811135 Suite, Apt. #, etc.
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City & State Boca Raton, FL	City & State Boca Raton, FL
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4. FEI Number 65-0647444	Applied For <input type="checkbox"/> Not Applicable
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Zip 33487	Country USA	Zip 33481	Country USA
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent RUSTINE, DAVID A 3299 NW 2 AVE STE 200 BOCA RATON FL 33431	7. Name and Address of New Registered Agent Name Rustine, David A. Street Address (P.O. Box Number is Not Acceptable) 7999 N. Federal Hwy Ste 202 City Boca Raton FL Zip Code 33487
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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: By: David A Rustine 4/1/04
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, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD RUSTINE, DAVID A 3299 NW BOCA RATON BLVD #200 BOCA RATON FL 33431 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD Rustine, David A. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7999 N. Federal Hwy #202 Boca Raton, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 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: By: David A Rustine 4/1/04 561-997-8000
Signature and typed or printed name of signing officer or director. Date Daytime Phone #