FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000041925 (4)

THE WINDWARD GROUP, INC.

FILED Mar 25 1998 8:00am Secretary of State



Principal Place of Business Regulater								
Concept Place of Business	Principal Place of Business Mailing Address					I IEBIFBUF IIU IUITU WITIF UUYIT BUHI UUTTI		HH 1141
B. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified C5(99/1998) 2. Principal Place of Business 2. Amiling Address 3. Date Incorporated or Qualified C5(99/1998) 5. Suite, April 4, etc. 2. Suite, April 4, etc. 2. Suite, April 4, etc. 2. Cry & State 2. Cry & State 2. Cry & State 2. Cry & State 2. Country 2. Principal Place of Busines Desired 3. Country 3. Country 3. Country 3. The corporation owes or has paid the current year heapy be presented by the country year year year year year year year ye								
3. Date Incorporated for Qualified (SQM) 1986 2. Finicipal Place of Business 2. Suite, Apt. 4, etc. 2. Suite, Apt.		1 01742				DO NOT WRITE IN THIS SPACE		
2. March 1. Applied Form 1. Applied Form 2. Applie	03		55			3. Date Incorporated or Qualified		
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Second S	22		27	27		5. Certificate of Status Desired Fee Required		
20 20 20 20 20 20 20 20	City & State)	City & State					
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name 12. Street Address (P. O. Box Number is Not Acceptable) 13. Street Address (P. O. Box Number is Not Acceptable) 14. City 15. 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 agent, are both in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, are both in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, are both in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, are both in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, are translated with a corporation's board of directors. I hereby accept the appointment are registered statement are registered agent, are translated agent, and accept the corporation's board of directors. I hereby accept the appointment are registered agent, are translated agent, and accept the appointment are registered agent, and accept the corporation's board of directors. I hereby accept the appointment are registered agent, and accept the appointment are registered agent, and accept the corporation's board of directors. I hereby accept the appointment are registered agent, and accept the appointment are registered agent. Are accepted agent agent and accept the corporation's board of directors. I hereby accept the appointment are registered agent. Are accepted agent agent and accept the appointment are registered agent. Are accepted agent agent and accept the appointment are registered agent. Are accepted agent agent and accept the appointment ar								
O. Name and Address of Current Registered Apent CARIE, JEFREY P. 781 POREST OAKS BLVD SPRINGHIL PL 34606 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Add City FL 85 Zip Cods 84 City FL 85 Zip Cods 85 Name 84 City FL 85 Zip Cods 85 Name 86 City FL 85 Zip Cods 86 City FL 86 Zip Cods 87 City FL 88 Zip Cods 88 City FL 88 Zip Cods 89 City FL 80 Zip Cods 89 City FL 80 Zip Cods 80 City FL 80 Zip Cods 81 City FL 80 Zip Cods 81 City FL 80 Zip Cods 82 City FL 80 Zip Cods 83 City FL 80 Zip Cods 84 City FL 85 Zip Cods 85 City FL 80 Zip Cods 86 City FL 80 Zip Cods 86 City FL 80 Zip Cods 87 City FL 80 Zip Cods 88 City FL 80 Zip Cods 89 City FL 80 Zip Cods 80 80	•	├ ── '	F-7	 	ry			
CARIE, JEFFREY P. 7361 FOREST OAKS BLVD SPRINGHILL PL 34606 12 Street Address (P.O. Box Number is Not Acceptable) 13 Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes the corporation submits this statement for the purpose of changing its registerer office or registered agent or both in the State of Florids Such change was authorized by the corporation submits this statement for the purpose of changing its registerer office or registered agent or both in the State of Florids Such change was authorized by the corporation's board of directors. I flereby accept the applications of Section 607 6005, Florida Statutes. SIGNATURE 12. OF FLORIS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OF FLORIS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CITY ST. ZP 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. ADDITIONS/CHANGES TO OFFICERS AND INCOME. 15. ADDITIONS/CHANGES TO OFFICERS AND INCOME. 15. ADDITIONS/CHANGES TO OFFICERS AND INCOME. 15. ADDITI	24			[30]				נוע
The Pursuant to the provisions of Socions 607.0502 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Section 607 605. Florida Statutes SIGNATURE Signature Inpedie period name or registered agent agent and accept the obligations of, Section 607 605. Florida Statutes PD	CAI		taur ueðisralen viðaur	- la	1 Name	10. Hame and Address of New Hogist	Nou Algorit	
SPRINGHILL FL 34808 84 City FL 85 Zip Cods						***		
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 agent, or both in the State of Florida Stude change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both in the State of Florida Stude change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of Section 607 0505, Florida Statutes. SIGNATURE PU						dress (P.O. Box Number is Not Acceptable)		
T1. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florids Statutes, the above named corporation submits this statement for the purpose of changing its 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 armitar with, and accept the obligations of, Section 607 0505. Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE SANADI, CLYDE 42 SUNNYSIDE LANE CONCORD MA 14.007-51-2P DELETE 21.006455 CITY-51-2P DELETE 21.006455 CITY-51-2P DELETE 31.006455 CITY-51-2P DELETE 41.006455 CITY-51-2P DELETE 41.006455 CITY-51-2P DELETE 41.006455 CITY-51-2P DELETE 41.006455 CITY-51-2P DELETE 51.006455 CITY-51-2P TITLE CITY-51-2P CI				6	3			_
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office or registered agoni, or both in the State of Formas Science Office of Formas Science agoni, or both in the State of Formas Science of Science Office	11. Pursuant t	to the provisions of Sections 607.	0502 and 607.1508, Florida Statu	ites, the abo	ve-named cor	poration submits this statement for the purpo	se of changing its r	egistered
12.	office or re agent. I ar	egistered agent, or both, in the S m familiar with, and accept the ol	ate of Florida. Such change was oligations of, Section 607.0505, F	authorized Iorida Statul	by the corpora es.	tion's board of directors. I hereby accept the	appointment as req	g stered
Title	SIGNATURE	Signature, typed or profed name of registerer	1 agent and tille if applicable (NO	TE Registered /	gent signature requ	ired when reinstaling) D	ATE	
SANADI, CLYDE	12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
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14. 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 annual report or supplemental air pal 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 in trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in	14. I hereby	certify that the information supplic	d with this filing does not qualify	for the exer	notion stated in	Section 119.07(3)(i), Florida Statutes. I furth	ner certify that the in	formation