

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000005592

Entity Name: FOUR WINDS INC.

FILED
Mar 05, 2005
Secretary of State

Current Principal Place of Business:

1645 PARK AVE N
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

1645 PARK AVE N
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 59-3425353

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHEA, BEATRICE
1645 PARK AVE N
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

DUPLANTIER RHEA, BEATRICE
1645 PARK AVE N
WINTER PARK, FL 32789 US

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.

SIGNATURE: BEATRICE DUPLANTIER RHEA

03/05/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RHEA, BEATRICE
Address: 1645 PARK AVE N
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: RHEA, JEAN E
Address: 1645 PARK AVE N
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: RHEA, KENNETH
Address: 1645 PARK AVE N
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: RHEA, ALEXANDER
Address: 1645 PARK AVE N
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: DOMERGUE, CHRISTIAN
Address: 1645 PARK AVE N
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: DUPLANTIER RHEA, BEATRICE
Address: 1645 PARK AVE N
City-St-Zip: WINTER PARK, FL 32789

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BEATRICE DUPLANTIER RHEA

PRES

03/05/2005

Electronic Signature of Signing Officer or Director

Date