

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000072098

Entity Name: CROSSWINDS FOUR, INC.

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

2021 EAST AVE.
PANAMA CITY, FL 32405

New Principal Place of Business:

234 E BEACH DRIVE
PANAMA CITY, FL 32401

Current Mailing Address:

2021 EAST AVE.
PANAMA CITY, FL 32405

New Mailing Address:

PO BOX 1030
PANAMA CITY, FL 32402

FEI Number: 59-3473102

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WHITTON, JEFFREY P
565 HARRISON AVE.
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ABRAMS, GREG
Address: 2021 NORTH EAST AVE.
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: RAFFIELD, WILLIAM M
Address: 2911 E 17TH ST.
City-St-Zip: PANAMA CITY, FL 32405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ABRAMS, GREG
Address: 234 E BEACH DRIVE
City-St-Zip: PANAMA CITY, FL 32401

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: GREG ABRAMS

D

04/27/2007

Electronic Signature of Signing Officer or Director

Date