

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 02, 1999 8:00 am  
Secretary of State

04-02-1999 90019 022 \*\*\*158.75

DOCUMENT # P97000091898

1. Corporation Name

WINCHESTER PROPERTY MANAGEMENT CORP.

Principal Place of Business

3200 NORTH FEDERAL HIGHWAY  
SUITE 206-9  
BOCA RATON FL 33431

Mailing Address

3200 NORTH FEDERAL HIGHWAY  
SUITE 206-9  
BOCA RATON FL 33431

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/23/1997

4. FEI Number

APPLIED FOR 65-0825966

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year intangible  
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21. 3200 N. Federal Highway

26. 3200 N. Federal Highway

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22. Suite 206-1

27. Suite 206-1

City & State

City & State

23. BOCA RATON

28. BOCA RATON

Zip

Country

Zip

Country

24. 33431

25. FL

29. 33431

30. FL

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KLEVE, PAUL

3200 NORTH FEDERAL HIGHWAY  
SUITE 206-9  
BOCA RATON FL 33431

81. Name

KLEVER, PAUL

82. Street Address (P.O. Box Number is Not Acceptable)

3200 N. FEDERAL HIGHWAY

83.

SUITE 206-1

84. City

BOCA RATON

FL

85. Zip Code

33431

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 office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

(REG. AGENT)

03-18-99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE S ☒ DELETE

NAME KLEVER, PAUL

STREET ADDRESS 3200 NORTH FEDERAL HIGHWAY, SUITE 206-9

CITY-ST-ZIP BOCA RATON FL 33431

TITLE PTD ☐ DELETE

NAME SCHNITZLER, FRIEDHELM

STREET ADDRESS 3200 NORTH FEDERAL HIGHWAY, SUITE 206-9

CITY-ST-ZIP BOCA RATON FL 33431

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

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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 annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FRIEDHELM SCHNITZLER 03-18-99 (361) 384-3300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0337236

CR2E034 (11/98)