2000 UNIFORM BUSINESS REPORT (UBR) FILED May 23, 2000 8:00 am Secretary of State OCUMENT # P97000 02 426 **Entity Name** 05-23-2000 90190 016 ***150.00 WINDWARD MARKETING GROUP, INC. micipal Place of Business Mailing Address 702 SWEETWATER BLVD. N. AUU48664 LONGWOOD, FL 32779 Principal Place of Business 3. Mailing Address 702 Sweetwater Blvd. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4, FEI Number City & State City & State Not Applicable 59-3480487 Longwood Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BOURRET, RONALD Street Address (P.O. Box Number is Not Acceptable) 1513 FOX GLEN DR WINTER SPRINGS FL 32708 City Zio Code 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 Richard Bourret, President (NOTE, Registered Agent signature required when reinstaling) title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change **PSD** Delete ilité BOURRET, RICHARD BAME STREET ADDRESS SIPPEL ADDRESS 702 Sweetwater Blvd. N. CITY - ST- ZIP TITY - ST - ZIP Longwood, FL 32779 Addition ☐ Change Delete TITLE HLE NAME HAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP JIT r - ST - ZIP -IIILE SINE - 🔄 - Delete Director NAME Bourret, Ronald C. STREET ADDRESS STREET ADDRESS 1513 Fox Glen Drive CITY - ST - ZIP CITY - ST- ZIP Winter Springs, FL 32708 Change Addition MILE NAME HAME STREET ADDRESS OFFEET ADDRESS Offic \$1 - ZiP CITY - ST - ZIP Addition Change TITLE Delete Hili GAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST- ZIP Change Addition Delete TITLE HAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY - ST - ZIP 13. Thereby 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 11 or Block 12 if

Richard Bourret, President SIGNATURE: 4

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered.