## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P98000027174

Entity Name: WINDOUGH.COM, INC.

FILED Jan 10, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
2500 N MILI 210	ITARY TRAIL				
	ON, FL 33431	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	ITARY TRAIL				
210 BOCA RAT	ON, FL 33431	US			
FEI Number:	65-0821951	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
#210 BOCA RAT	ITARY TRAIL ON, FL 33431 named entity su	ıbmits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	E:				
Electronic Signature of Registered Agent			ent	Date	
•	_	satisfy its Intangible Tax filing req	uirement and elects to do so ( ).		
Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ARMAND, KAREE	AVENUE SUITE 1600	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E SAFER, PATRICI 2500 N MILITARY BOCA RATON, FI	′ TRAIL #210	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () E KURLAND, DANIE 2500 N MILITARY BOCA RATON, FI	′ TRAIL # 210	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D () E KURLAND, SCOT 2500 N MILITARY		Title: Name: Address:	() Change () Addition	

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: PATRICIA SAFER D 01/10/2002