

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 08, 2003 8:00 am
Secretary of State

01-08-2003 90135 013 ***150.00

DOCUMENT # P98000064966



1. Entity Name
WINDSOR BAY CAPITAL, INC.

Principal Place of Business
5859 N.W. 34TH WAY
BOCA RATON FL 33496

Mailing Address
5859 N.W. 34TH WAY
BOCA RATON FL 33496

2. Principal Place of Business
5859 Windsor Terrace
Suite, Apt. #, etc.

3. Mailing Address
5859 Windsor Terrace
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
Boca Raton, FL
Zip **33496** **Country** **U.S.A.**

City & State
Boca Raton, FL
Zip **33496** **Country** **U.S.A.**

4. FEI Number **65-0854537**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MEISEL, LEE B
5859 N.W. 34TH WAY
BOCA RATON FL 33496

Name **Meisel, Lee B.**

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

5859 Windsor Terrace

City **Boca Raton** **FL** **Zip Code** **33496**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Lee B. Meisel**

1/4/03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

The corporation does not owe
Intangible Personal Property
tax on its year 2003 tax return

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTSD** ☐ **Delete**
NAME **MEISEL, LEE B**
STREET ADDRESS **5859 N.W. 34TH WAY**
CITY-ST-ZIP **BOCA RATON FL 33496**

TITLE **PTSD** ☒ **Change** ☐ **Addition**
NAME **Meisel, Lee B.**
STREET ADDRESS **5859 Windsor Terrace**
CITY-ST-ZIP **Boca Raton, FL 33496**

TITLE ☐ **Delete**
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STREET ADDRESS
CITY-ST-ZIP

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12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Lee B. Meisel** **1/4/03 (561) 994-5450**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Date** **Daytime Phone #**

CR2E034 (10/02)