

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000075419

1. Entity Name

THE WINS, INC.

Principal Place of Business

5855 PLACIDA RD. STE. 300  
ENGLEWOOD FL 34224

Mailing Address

9414 HEARTWELLVILLE AVE  
ENGLEWOOD FL 34224-8210  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0864649

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

VANDEBURG, GLORIA G

9414 HEARTWELLVILLE AVE  
ENGLEWOOD FL 34224

Name

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

City

FL

Zip Code

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.

SIGNATURE Gloria G. Vanderburg Gloria G. Vanderburg 2-14-00  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Delete  
NAME P  
STREET ADDRESS LANES, DENISE H  
CITY-ST-ZIP 5855 PLACIDA RD STE 302  
ENGLEWOOD FL 34224

TITLE ☒ Change ☐ Addition  
NAME P  
STREET ADDRESS Vanderburg, Gloria G  
CITY-ST-ZIP 9414 Heartwellville Ave  
Englewood, FL 34224

TITLE ☒ Delete  
NAME VP  
STREET ADDRESS BOGGESE, DAWN  
CITY-ST-ZIP 39 BUNKER PL  
ROTONDA WEST FL 33947

TITLE ☒ Change ☐ Addition  
NAME VP  
STREET ADDRESS Lanes, Denise H  
CITY-ST-ZIP 5855 Placida Rd Ste 300  
Englewood, FL 34224

TITLE ☐ Delete  
NAME T  
STREET ADDRESS WEST-WALKER, JEAN  
CITY-ST-ZIP 141 W BAFFIN DR  
VENICE FL 34293

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Delete  
NAME S  
STREET ADDRESS VANDERBURG, GLORIA G  
CITY-ST-ZIP 9414 HEARTWELLVILLE AVE  
ENGLEWOOD FL 34224

TITLE ☒ Change ☐ Addition  
NAME S  
STREET ADDRESS Hoffman, Phyllis  
CITY-ST-ZIP 307 Rotonda Circle  
Rotonda West, FL 33947

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Gloria G. Vanderburg  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-14-00  
Date

(941) 697-4488  
Daytime Phone #

CR2E034 (9/99)