## 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

## May 03, 1999 8:00 am Secretary of State

05-03-1999 90016 013 \*\*\*150.00

DOCUMENT # P98000085749 1. Corporation Name WINJUM, INC. Mailing Address Principal Place of Business 105 GARDENER DR. 105 GARDENER DR. SHALIMAR FL 32579 SHALIMAR FL 32579 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/05/1998 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 Zip Country Žip Country 8. This corporation owes the current year Intangible ΧNο Personal Property Tax. 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent WINJUM, BRENT 82 Street Address (P.O. Box Number is Not Acceptable) 105 GARDENER DR. SHALIMAR FL 32579 83 Zip Code City 85 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 title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE PRESIDENT ☐ Change 1.1 TITLE TITLE BRENT C WINJUM 105 GARDNER DR 1.2 NAME NAME 1.3 STREET ADDRESS STREET ADDRESS SHALIMAR, PL 32579 1.4 CITY-ST-ZIP CITY-ST-ZIP VICE PRESIDEM Change ☐ Addition ☐ DELETE 2.1 TITLE TITLE ANNE T. WINJUM 105 GAR NER DR. 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS SHALIMAR, PL 3257 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change Addition TITLE 6.2 NAME NAME 63 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

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:

CR2E034 (11/98