# 2005 FOR PROFIT CORPORATION
## ANNUAL REPORT

DOCUMENT # P99000032514

1. Entity Name
WINDMILL ENTERPRISE, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 24 DOCKSIDE LANE #466 | 24 DOCKSIDE LANE #466 |
| KEY LARGO, FL 33037 _ US | KEY LARGO, FL 33037   US |

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03022005    No Chg-P    CR2E034 (10/03)

| 4. FEI Number | Applied For |
|---|---|
| 65-0917830 | Not Applicable |

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

### 6. Name and Address of Current Registered Agent

FREY, FREDERICK R
19 SOUTH BRIDGE LANE
KEY LARGO, FL 33037

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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_____

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, 2005 Fee will be $550.00**

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

### 10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | D |
| NAME | FREY, FREDERICK R |
| STREET ADDRESS | 19 SOUTH BRIDGE LANE |
| CITY-ST-ZIP | KEY LARGO, FL 33037 |

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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: _____    3/15/05    305 367-3313

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR        Date        Daytime Phone #