

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000043741

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: ROSEWIND PROPERTY, INC.

## Current Principal Place of Business:

4628 SANTA BARBARA BLVD  
CAPE CORAL, FL 33914

## New Principal Place of Business:

## Current Mailing Address:

4628 SANTA BARBARA BLVD  
CAPE CORAL, FL 33914

## New Mailing Address:

FEI Number: 65-0919659

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OTTO, ELEANOR  
4628 SANTA BARBARA BLVD  
CAPE CORAL, FL 33904 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: KRUPNICK, SHELDON  
Address: 100 RING RD W, SUITE 209  
City-St-Zip: GARDEN CITY, NY 11530

Title: TD ( ) Delete  
Name: NIBLETT, SAM  
Address: 278 FULLER RD  
City-St-Zip: EASTON, ME 04740

Title: SD ( ) Delete  
Name: OTTO, ELEANOR  
Address: 2623 SW 52ND TERRACE  
City-St-Zip: CAPE CORAL, FL 33914

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: KRUPNICK, SHELDON

PD

04/29/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date