

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000085501

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** MDC SOUTH WIND CORP.

**Current Principal Place of Business:**

C/O MENIN DEVELOPMENT  
324 ROYAL PALM WAY, SUITE 100  
PALM BEACH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

C/O MENIN DEVELOPMENT  
324 ROYAL PALM WAY, SUITE 100  
PALM BEACH, FL 33480

**New Mailing Address:**

**FEI Number:** 65-0950186

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CM RAC, INC.  
% MENIN DEVELOPMENT  
324 ROYAL PALM WAY, SUITE 100  
PALM BEACH, FL 33480 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

**OFFICERS AND DIRECTORS:**

**Title:** PSTD  
**Name:** MENIN, CRAIG I  
**Address:** 324 ROYAL PALM WAY, SUITE 100  
**City-St-Zip:** PALM BEACH, FL 33480

I hereby 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 all other like empowered.

SIGNATURE: CRAIG MENIN

PSTD

04/28/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date