

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S08255

FILED
Apr 02, 2007
Secretary of State

Entity Name: TRADE WIND ESTATE HOMES, INC.

Current Principal Place of Business:

407 SE 17TH AVE
CAPE CORAL, FL 33990

New Principal Place of Business:

720 NE 25TH AVE. # 27
CAPE CORAL, FL 33909

Current Mailing Address:

407 SE 17TH AVE
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 65-0226700 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DEPAOLA, THOMAS
407 SE 17TH AVE
CAPE CORAL, FL 33990 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: D () Delete
Name: DEPAOLA, THOMAS J.,
Address: 407 SE 17TH AVE
City-St-Zip: CAPE CORAL, FL 33990 US

Title: S () Delete
Name: DEPAOLA, DEBRA A.,
Address: 407 SE 17TH AVENUE
City-St-Zip: CAPE CORAL, FL 33990 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP () Change (X) Addition
Name: DEPAOLA, MATTHEW T
Address: 407 SE 17TH AVE
City-St-Zip: CAPE CORAL, FL 33990 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DEBRA A DEPAOLA

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04/02/2007

Electronic Signature of Signing Officer or Director

_____ Date