FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Apr 20 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** (2)WINDSOR & WINDSOR, INC. Principal Place of Business Mailing Address % KENNETH. E. WINDSOR, JR % KENNETH. E. WINDSOR. JR 1504 CHENEY HWY 2265 ST. ANDREWS DR DO NOT WRITE IN THIS SPACE TITUSVILLE FL 32780 TITUSVILLE FL 32780 HS 3. Date Incorporated or Qualified 01/09/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 95:3050655 Not Applicable 26 21 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 Country ZrD Country 6. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 WINDSOR, KENNETH E. J 2285 ST. ANDREWS DR 82 Street Address (P.O. Box Number is Not Acceptable) TITUSVILLE FL 32780 83 City Zip Code 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, typed or printed name of registered agent and titlinif applicable (NOTE Registored Agent e-gnature required when reinstating) (10/97) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. ☐ DELETE Change Addition TITLE 1.1 TITLE WINDSOR, KENINETH E. J NAME 12 NAME CR2E034 2265 ST. ANDREWS DR STREET ADDRESS 1.3 STREET ADDRESS TITUSVILLE FL CITY - ST - ZIP 1.4 CITY-ST-ZIP Change DELETE Addition TIFLE 2.1 TITLE WINDSOR, KEN JIR NAME 2.2 NAME 2265 ST. ANDREWS DR STREET ADDRESS 2.3 STREET ADDRESS PENSACOLA FL 2.4 CITY-\$1-ZIP CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition WINDSOR, SHIRLEY NAME 3 2 NAME 2265 ST. ANDREWS DR STREET ADDRESS 3 3 STREET ADDRESS TITUSVILLE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE WINDSOR, PAMELA NAME 4. 2 NAME 2285 ST. ANDREWS DR STREET ADDRESS 4.3 STREET ADDRESS PENSACOLA FL CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME

> 5.3 STREET ADDRESS 54 CITY-ST-ZIP

6.3 STREET ADDRESS 64 CITY-ST-ZIP

61 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Ker Windsor Jr.

DELETE

Thereby 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 recoiver or trustee emprishered 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. 4/9/98

Change

Addition

FILED