## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S29958

City-St-Zip:

Entity Name: DALE R. WINSLETTE & COMPANY

FORT WALTON BEACH, FL 32548 US

FILED Apr 17, 2009 Secretary of State

| Current Principal Place of Business:  | New Principal Place               | of Business:                         |
|---|-----------------------------------|--------------------------------------|
| 396 GARDNER DRIVE NE<br>FORT WALTON BEACH, FL 32548 US                                  |                                   |                                      |
| Current Mailing Address:  | New Mailing Address               | :                                    |
| 396 GARDNER DRIVE NE<br>FORT WALTON BEACH, FL 32548 US                                  |                                   |                                      |
| FEI Number: 65-0257936 FEI Number Applied For ( )                                       | FEI Number Not Applicable ( )     | Certificate of Status Desired ( )    |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: |                                   |                                      |
| WINSLETTE, DALE R PRES<br>396 GARDNER DRIVE NE<br>FORT WALTON BEACH, FL 32548 US        |                                   |                                      |
| The above named entity submits this statement for the puin the State of Florida.        | urpose of changing its registered | office or registered agent, or both, |
| SIGNATURE:  |                                   |                                      |
| Electronic Signature of Registered Ager   | nt                                | Date                                 |
| Election Campaign Financing Trust Fund Contribution ( ).                                |                                   |                                      |
| OFFICERS AND DIRECTORS:   | ADDITIONS/CHANGE                  | S TO OFFICERS AND DIRECTORS:         |
| Title: PRES ( ) Delete Name: WINSLETTE, DALE R Address: 396 GARDNER DRIVE NE            | Title:<br>Name:<br>Address:       | ( ) Change ( ) Addition              |

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DALE R. WINSLETTE PRES 04/17/2009