

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000055173

FILED
Apr 28, 2010
Secretary of State

Entity Name: WELLS ENTERPRISES - ITNOC, INC.

Current Principal Place of Business:

10744 GRAYSON CT
JACKSONVILLE, FL 32220

New Principal Place of Business:

Current Mailing Address:

10744 GRAYSON CT
JACKSONVILLE, FL 32220

New Mailing Address:

FEI Number: 26-2568421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS, INC.
300 FIFTH AVENUE SOUTH
SUITE 101-330
NAPLES, FL 34102 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: TSD
Name: WELLS, LARRY
Address: 10744 GRAYSON CT
City-St-Zip: JACKSONVILLE, FL 32220

Title: PD
Name: WELLS, ELAINE
Address: 10744 GRAYSON CT
City-St-Zip: JACKSONVILLE, FL 32220

Title: D
Name: WELLS, WILLIAM
Address: 6135 FLICKER AVE
City-St-Zip: JACKSONVILLE, FL 32219

Title: D
Name: WELLS, ANTHONY
Address: 6135 FLICKER AVE
City-St-Zip: JACKSONVILLE, FL 32219

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: LARRY G WELLS

TSD

04/28/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date