

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 186236

FILED
Mar 31, 2009
Secretary of State

Entity Name: WEDGWORTH FARMS INC

Current Principal Place of Business:

651 N.W. 9TH STREET
BELLE GLADE, FL 33430

New Principal Place of Business:

Current Mailing Address:

651 N.W. 9TH STREET
BELLE GLADE, FL 33430

New Mailing Address:

FEI Number: 59-0695314

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEDGWORTH, DENNIS G
651 NW 9TH STREET
BELLE GLADE, FL 33430 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: ST () Delete
Name: MILLER, JR, JOSEPH D ASST
Address: 208 SAGINAW AVE
City-St-Zip: CLEWISTON, FL 33440

Title: VD () Delete
Name: BOYNTON, WAYNE A
Address: PO BOX 1428
City-St-Zip: LOXAHATCHEE, FL 33470

Title: COBD () Delete
Name: WEDGWORTH, GEORGE H
Address: EAST PALM BEACH RD.
City-St-Zip: BELLE GLADE, FL 33430

Title: STD () Delete
Name: OETZMAN, BARBARA A
Address: 1071 FAIRVIEW LANE
City-St-Zip: RIVIERA BEACH, FL 33404

Title: PD () Delete
Name: WEDGWORTH, DENNIS G
Address: 13643 STAMFORD DR
City-St-Zip: WELLINGTON, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: JORGE A. SUAREZ JR.

CNTR

03/31/2009

Electronic Signature of Signing Officer or Director

_____ Date