
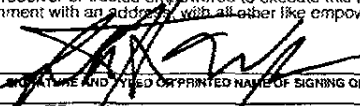


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2004 08:00 AM
Secretary of State

DOCUMENT # 169154		
1. Entity Name WELLS MOTOR CO		
Principal Place of Business 1600 US 27 S AVON PARK, FL 33825 US		Mailing Address 1600 US 27 S AVON PARK, FL 33825 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent WELLS, STANLEY H. 1600 US 27 S AVON PARK, FL 33825		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when revisiting) _____ DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WELLS, KENNETH S. 2600 W. SEVILLE DR. AVON PARK, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WELLS, JANE H LAKE LILLIAN DR. AVON PARK, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WELLS, STANLEY H AZALIA DR AVON PARK, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WELLS, KENNETH R LAKE LILLIAN DR. AVON PARK, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRYANT, SARAH J 2435 LAKE LILLIAN DR AVON PARK, FL 33825	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby 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 report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.		
SIGNATURE:  Stanley H Wells - P/D		1-21-04 863 453-6644