

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 07, 2005 08:00 AM
Secretary of State

DOCUMENT # 496301

1. Entity Name
C.M.W. INVESTMENTS, INC.



Principal Place of Business
505 BEACHLAND BLVD
SUITE 1-261
VERO BEACH, FL 32963 US

Mailing Address
PMB #261
505 BEACHLAND BLVD
VERO BEACH, FL 32963 US



01042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1650443

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WELLFORD, JOHN L., JR.
PMB #264
505 BEACHLAND BLVD
VERO BEACH, FL 32963

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T WELLFORD, JOHN L. JR. 505 BEACHLAND BLVD STE 1-261 VERO BEACH, FL 32963 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D WELLFORD, JOHN L. JR. 505 BEACHLAND BLVD STE 1-261 VERO BEACH, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PS WELLFORD, MARY A. 505 BEACHLAND BLVD, STE 1-261 VERO BEACH, FL 32963 |
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01/07/05-80022-011 150.00

**DO NOT WRITE
IN THIS SPACE**

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 607, 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:

Mary A. Wellford, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/04/05 772-234-1441
Date Daytime Phone #