

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005823

Entity Name: WORLD TRAVEL WELLS, INC.

FILED
Mar 19, 2009
Secretary of State

Current Principal Place of Business:

1724 W. SCHUYLKILL ROAD
DOUGLASSVILLE, PA 19518

New Principal Place of Business:

Current Mailing Address:

1724 W. SCHUYLKILL ROAD
DOUGLASSVILLE, PA 19518

New Mailing Address:

FEI Number: 23-2228965

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REILLY, NANCY
1290 POTOMAC DRIVE
MERRITT ISLAND, FL 32952 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: D () Delete
Name: MCCLASKEY, JUDITH W
Address: 1724 W. SCHUYLKILL ROAD
City-St-Zip: DOUGLASSVILLE, PA 19518

Title: D () Delete
Name: DAVIDSON, JAMIE W
Address: 1724 W. SCHUYLKILL ROAD
City-St-Zip: DOUGLASSVILLE, PA 19518

Title: P () Delete
Name: WELLS, JAMES A
Address: 1724 W. SCHUYLKILL ROAD
City-St-Zip: DOUGLASSVILLE, PA 19518

Title: CEO () Delete
Name: WELLS, JAMES R
Address: 1724 W. SCHUYLKILL ROAD
City-St-Zip: DOUGLASSVILLE, PA 19518

Title: ST () Delete
Name: WELLS, RICHARD G
Address: 1724 W. SCHUYLKILL ROAD
City-St-Zip: DOUGLASSVILLE, PA 19518

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: JAMES R WELLS

CEO

03/19/2009

Electronic Signature of Signing Officer or Director

Date