

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G82661

Entity Name: WENTCO, INC.

FILED
Jan 19, 2004
Secretary of State

Current Principal Place of Business:

3861 EDWARDS ST
FORT MYERS, FL 33916 US

New Principal Place of Business:

Current Mailing Address:

3861 EDWARDS STREET
FT. MYERS, FL 33916 US

New Mailing Address:

FEI Number: 59-2391390

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WALDRON, EUGENE E J
124 N BREVARD AVE
P.O. BOX 349
ARCADIA, FL 34266 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: PD () Delete
Name: EARLE, RONNIE J.,
Address: 4950 CEDAR HAMMOCK COURT
City-St-Zip: FT. MYERS, FL

Title: V () Delete
Name: THOMAS, ROBERT C.,
Address: 6 SEVILLA AVE
City-St-Zip: ARCADIA, FL

Title: VD () Delete
Name: NOBLES, GERALD,
Address: 144 FLORIDA STREET
City-St-Zip: FORT OGDEN, FL

Title: S () Delete
Name: PEKAREK, CATHERINE J,
Address: 1122 SE 17TH ST
City-St-Zip: CAPE CORAL, FL

Title: T () Delete
Name: CARR, DEBRA L.,
Address: 1311 S.E. 21ST TERR.
City-St-Zip: CAPE CORAL, FL

Title: D () Delete
Name: CAMPBELL, SCOTT T
Address: 715 B RICHMOND AVE
City-St-Zip: LEHIGH ACRES, FL

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
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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 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 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: ROBERT C. THOMAS

V

01/19/2004

Electronic Signature of Signing Officer or Director

Date