

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H72883

Entity Name: WELLS, INC.

FILED  
Jan 26, 2011  
Secretary of State

**Current Principal Place of Business:**

% WILLIAM C. WELLS  
1701 COMMERCE AVE  
HAINES CITY, FL 33844 US

**New Principal Place of Business:**

**Current Mailing Address:**

% WILLIAM C. WELLS  
1701 COMMERCE AVE  
HAINES CITY, FL 33844 US

**New Mailing Address:**

FEI Number: 59-2570370

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

WELLS, WILLIAM C.  
1701 COMMERCE AVE  
HAINES CITY, FL 33844 US

**Name and Address of New Registered Agent:**

WELLS, WILLIAM C.  
1701 COMMERCE AVE  
LOT#6  
HAINES CITY, FL 33844 US

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

01/26/2011

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: WELLS, WILLIAM C.  
Address: 1701 COMMERCE AVE.  
City-St-Zip: HAINES CITY, FL

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM C. WELLS

DP

01/26/2011

Electronic Signature of Signing Officer or Director

Date