## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J10154

Entity Name: WENDART, INC.

FILED Jul 29, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

C/O ANDY JOHNSON C/O CINDY PARRISH 3000 N. MAIN STREET 3000 N MAIN STREET GAINESVILLE, FL 32609 GAINESVILLE, FL 32609

**Current Mailing Address:** New Mailing Address:

4000 SW COLLEGE ROAD 4000 SW COLLEGE RD OCALA, FL 34474 OCALA, FL 34474

FEI Number: 59-2686476 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JOHNSON, ANDY PARRISH, CINDY 3000 N. MÁIN STREET 4000 SW COLLGE ROAD GAINESVILLE, FL 32609 US OCALA, FL 34474

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: CINDY PARRISH 07/29/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

(X) Change ( ) Addition Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete GOGUEN, CINDY PARRISH, CINDY Name: Name: 4000 SW COLLEGE ROAD 4000 SW COLLEGE ROAD Address: Address: City-St-Zip: OCALA, FL 34474 City-St-Zip: OCALA, FL 34474

Title: PD Title: PD () Delete (X) Change ( ) Addition Name: SULLIVAN, ARTHUR Name: SULLIVAN, ARTHUR 1000 INDIAN RD 24640 HARBOUR VIEW DRIVE Address: Address:

PALM BEACH, FL 33480 PONT VEDRA BEACH, FL 32082 City-St-Zip: City-St-Zip:

Title: Title: STD () Delete STD (X) Change ( ) Addition BOSTIC, WANDA Name: BOSTIC, WANDA Name:

10609 S.W. 12TH TERRACE 2771 NORTH YOUNG BLVD Address: Address: City-St-Zip: MICANOPY, FL 32667 City-St-Zip: CHIEFLAND, FL 32626

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: CINDY PARRISH SEC 07/29/2009