

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003718

FILED
Apr 30, 2009
Secretary of State

Entity Name: WELLSPRING, INC.

Current Principal Place of Business:

113 NW CRYSTAL ST
CRYSTAL RIVER, FL 34428

New Principal Place of Business:

Current Mailing Address:

113 NW CRYSTAL ST
CRYSTAL RIVER, FL 34428

New Mailing Address:

FEI Number: 56-2404609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOWERS, THELMA P REV.
113 NW CRYSTAL ST
CRYSTAL RIVER, FL 34428 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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BOWERS, THELMA P REV.
Address: 113 NW CRYSTAL ST
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: D () Delete
Name: BRADEN, JOHNATHAN
Address: 1016 REGENT ST
City-St-Zip: EDGEWATER, FL 32132

Title: D () Delete
Name: BOWERS, KRISTA
Address: 113 NW CRYSTAL ST
City-St-Zip: CRYSTAL RIVER, FL 34428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BRADEN, JOHNATHAN
Address: 3034 WOODLAWN DR.
City-St-Zip: EDGEWATER, FL 32132

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THELMA P. BOWERS

DP

04/30/2009

Electronic Signature of Signing Officer or Director

Date