

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006732

FILED
May 04, 2009
Secretary of State

Entity Name: WE-LIT, INC.

Current Principal Place of Business:

467 FOREST DRIVE NORTH
HAVANA, FL 32333 US

New Principal Place of Business:

2014 PLANTATION KEY CIRCLE
304
BRANDON, FL 33511 US

Current Mailing Address:

2014 PLANTATION KEY CIRCLE
304
BRANDON, FL 33511 US

New Mailing Address:

FEI Number: 20-5111184 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FRAZIER, QUIANA
2014 PLANTATION KEY CIRCLE APT 304
BRANDON, FL 33511 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

Date

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: FRAZIER, QUIANA
Address: 2014 PLANTATION KEY CIRCLE APT 304
City-St-Zip: BRANDON, FL 33511

Title: DIR () Delete
Name: FRAZIER, NAJAH
Address: 2014 PLANTATION KEY CIRCLE APT 304
City-St-Zip: BRANDON, FL 33511 US

Title: CFO (X) Delete
Name: ALEXANDER, JOARVONIA
Address: 2333 SAINT MARKS STREET
City-St-Zip: TALLAHASSEE, FL 32333 US

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:

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: QUIANA FRAZIER

DIR

05/04/2009

Electronic Signature of Signing Officer or Director

Date