

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000101621

Entity Name: WOLFENDEN ENTERPRISES, INC

FILED
Jun 16, 2009
Secretary of State

Current Principal Place of Business:

8525 DEHAVILLAND CT
VERO BEACH, FL 32968

New Principal Place of Business:

Current Mailing Address:

8525 DEHAVILLAND CT
VERO BEACH, FL 32968

New Mailing Address:

FEI Number: 65-1146167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLFENDEN, HELENE
8525 DEHAVILLAND CT.
VERO BEACH, FL 32968 US

Name and Address of New Registered Agent:

WOLFENDEN, HELENE DIRECTO
8525 DEHAVILLAND CT.
VERO BEACH, FL 32968 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: HELENE WOLFENDEN

06/16/2009

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: D () Delete
Name: WOLFENDEN, IAN
Address: 8525 DEHAVILLAND CT.
City-St-Zip: VERO BEACH, FL 32968

Title: D () Delete
Name: WOLFENDEN, HELENE
Address: 8525 DEHAVILLAND CT.
City-St-Zip: VERO BEACH, FL 32968

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WOLFENDEN, IAN DIRECTO
Address: 8525 DEHAVILLAND CT.
City-St-Zip: VERO BEACH, FL 32968

Title: D (X) Change () Addition
Name: WOLFENDEN, HELENE DIRECTO
Address: 8525 DEHAVILLAND CT.
City-St-Zip: VERO BEACH, FL 32968

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: HELENE WOLFENDEN

DIRE

06/16/2009

Electronic Signature of Signing Officer or Director

Date