2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 16, 2009
Secretary of State

DOCUMENT# P02000060665

Entity Name: WEXFORD, INC.

Current Principal Place of Business:

5675 N. ATLANTIC AVE
111
COCOA BEACH, FL 32931

New Principal Place of Business:

818 EAST NEW HAVEN AVE
MELBOURNE, FL 32901

Current Mailing Address:

5675 N. ATLANTIC AVE
111
COCOA BEACH, FL 32931

New Mailing Address:

818 EAST NEW HAVEN AVE
MELBOURNE, FL 32901

FEI Number: 47-0876620 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NOLAN, JOHN J
5675 N. ATLANTIC AVE #14
COCOA BEACH, FL 32931 US

Name and Address of New Registered Agent:

NOLAN, JOHN J
8961 LAKE DRIVE
303
CAPE CANAVERAL, FL 32920 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: 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: NOLAN, JOHN J
Address: 5675 N. ATLANTIC AVE #111
City-St-Zip: COCOA BEACH, FL 32931

Title: D ( ) Delete
Name: NOLAN, MARY S
Address: 5675 N. ATLANTIC AVE #111
City-St-Zip: COCOA BEACH, FL 32931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: NOLAN, JOHN J
Address: 8961 LAKE DRIVE #303
City-St-Zip: CAPE CANAVERAL, FL 32901

Title: D (X) Change ( ) Addition
Name: NOLAN, MARY S
Address: 8961 LAKE DRIVE #303
City-St-Zip: CAPE CANAVERAL, FL 32920

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: MARY S. NOLAN D 06/16/2009
Electronic Signature of Signing Officer or Director — Date