

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000069701

FILED  
Feb 25, 2010  
Secretary of State

**Entity Name:** FELTON, WOOTEN & FELTON, INC.

**Current Principal Place of Business:**

6732 18TH ST S  
SAINT PETERSBURG, FL 33712

**New Principal Place of Business:**

**Current Mailing Address:**

6732 18TH ST S  
SAINT PETERSBURG, FL 33712

**New Mailing Address:**

**FEI Number:** 59-2418921

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FELTON, WILLIE  
6732 18TH ST S  
SAINT PETERSBURG, FL 33712 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** WOOTEN, JOHN H JR.  
**Address:** 1205 SHINING WATER  
**City-St-Zip:** RALEIGH, NC 276147271

**Title:** VP  
**Name:** WOOTEN-SPENCER, PAMELA  
**Address:** 5418 WHISPERWOOD DR  
**City-St-Zip:** DURHAM, NC 27713

**Title:** STD  
**Name:** FELTON, WILLIE B JR.  
**Address:** 6732 18TH STREET SOUTH  
**City-St-Zip:** ST. PETERSBURG, FL 33712 US

**Title:** VP  
**Name:** FELTON, SONJA  
**Address:** 3143 QUEENSBORO AVE S  
**City-St-Zip:** ST PETERSBURG, FL 33712

I hereby 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 all other like empowered.

**SIGNATURE:** WILLIE FELTON

STD

02/25/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date