

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000081572

Entity Name: WELLS RENOVATION, INC.

FILED
Apr 19, 2005
Secretary of State

Current Principal Place of Business:

5027 MATTHEW ROAD
PACE, FL 32571

New Principal Place of Business:

5655 BEALE FORD ROAD
PACE, FL 32571

Current Mailing Address:

5027 MATTHEW ROAD
PACE, FL 32571

New Mailing Address:

5655 BEALE FORD ROAD
PACE, FL 32571

FEI Number: 56-2378882

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELLS, GERALD A
5027 MATTHEW ROAD
PACE, FL 32571 US

Name and Address of New Registered Agent:

WELLS, GERALD A
5655 BEALE FORD RD
PACE, FL 32571 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: GERALD A. WELLS

04/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WELLS, GERALD A
Address: 5027 MATTHEW ROAD
City-St-Zip: PACE, FL 32571

Title: D () Delete
Name: WELLS, MELISSA L
Address: 5027 MATTHEW ROAD
City-St-Zip: PACE, FL 32571

Title: SEC () Delete
Name: CHAMBERS, CHRISTOPHER M
Address: 4255 SASSAFRAS AVE
City-St-Zip: MILTON, FL 32583 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WELLS, GERALD A
Address: 5655 BEALE FORD ROAD
City-St-Zip: PACE, FL 32571 US

Title: VP (X) Change () Addition
Name: WELLS, MELISSA L
Address: 5655 BEALE FORD ROAD
City-St-Zip: PACE, FL 32571 US

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MELISSA L. WELLS

VP

04/19/2005

Electronic Signature of Signing Officer or Director

Date