2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P05000002996

1. Entity Name
J.H. WELLS, INC

Principal Place of Business	Mailing Address
1304 SEMINARY ST.	1304 SEMINARY ST.
KEY WEST, FL 33040	KEY WEST, FL 33040

DO NOT WRITE IN THIS SPACE

04282008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-3348308	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WELLS, JOHN
1304 SEMINARY ST.
KEY WEST, FL 33040

DO NOT WRITE
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _John Wells_   _4/28/2008_

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U000000942808
05/29/08-80033-011 150.00

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	WELLS, JOHN
STREET ADDRESS	1304 SEMINARY ST.
CITY-ST-ZIP	KEY WEST, FL 33040

TITLE	D
NAME	HAWKINS, JOY
STREET ADDRESS	1304 SEMINARY ST.
CITY-ST-ZIP	KEY WEST, FL 33040

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _John Wells_   John Wells   4/28/2008 305-296-8269

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #