

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000057197

Entity Name: WEXFORD TRAINING, INC.

FILED  
Feb 27, 2009  
Secretary of State

## Current Principal Place of Business:

4519 SW 48TH AVE  
PALM CITY, FL 34990

## New Principal Place of Business:

4545 CITRUS BLVD  
PALM CITY, FL 34990

## Current Mailing Address:

4519 SW 48TH AVE  
PALM CITY, FL 34990

## New Mailing Address:

4545 CITRUS BLVD  
PALM CITY, FL 34990

FEI Number: 20-4030337

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NELSEN, KIRSTEN  
4519 SW 48TH AVE  
PALM CITY, FL 34990 US

## Name and Address of New Registered Agent:

NELSEN, KIRSTEN  
4545 CITRUS BLVD  
PALM CITY, FL 34990 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:

02/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: NELSEN, KIRSTEN  
Address: 4519 SW 48TH AVE  
City-St-Zip: PALM CITY, FL 34990

Title: VP ( ) Delete  
Name: NELSEN, KIRSTEN  
Address: 4519 SW 48TH AVE  
City-St-Zip: PALM CITY, FL 34990

Title: SEC ( ) Delete  
Name: NELSEN, KIRSTEN  
Address: 4519 SW 48TH AVE  
City-St-Zip: PALM CITY, FL 34990

Title: TRES ( ) Delete  
Name: NELSEN, KIRSTEN  
Address: 4519 SW 48TH AVE  
City-St-Zip: PALM CITY, FL 34990

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: NELSEN, KIRSTEN  
Address: 4545 CITRUS BLVD  
City-St-Zip: PALM CITY, FL 34990

Title: VP (X) Change ( ) Addition  
Name: NELSEN, KIRSTEN  
Address: 4545 CITRUS BLVD  
City-St-Zip: PALM CITY, FL 34990

Title: SEC (X) Change ( ) Addition  
Name: NELSEN, KIRSTEN  
Address: 4545 CITRUS BLVD  
City-St-Zip: PALM CITY, FL 34990

Title: TRES (X) Change ( ) Addition  
Name: NELSEN, KIRSTEN  
Address: 4545 CITRUS BLVD  
City-St-Zip: PALM CITY, FL 34990

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: KIRSTEN NELSEN

P

02/27/2009

Electronic Signature of Signing Officer or Director

Date