2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2010
Secretary of State

DOCUMENT# P05000057197

Entity Name: WEXFORD TRAINING, INC.

Current Principal Place of Business:

4545 CITRUS BLVD
PALM CITY, FL 34990

New Principal Place of Business:

Current Mailing Address:

4545 CITRUS BLVD
PALM CITY, FL 34990

New Mailing Address:

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
4545 CITRUS BLVD
PALM CITY, FL 34990 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: P
Name: NELSEN, KIRSTEN
Address: 4545 CITRUS BLVD
City-St-Zip: PALM CITY, FL 34990

Title: VP
Name: NELSEN, KIRSTEN
Address: 4545 CITRUS BLVD
City-St-Zip: PALM CITY, FL 34990

Title: SEC
Name: NELSEN, KIRSTEN
Address: 4545 CITRUS BLVD
City-St-Zip: PALM CITY, FL 34990

Title: TRES
Name: NELSEN, KIRSTEN
Address: 4545 CITRUS BLVD
City-St-Zip: PALM CITY, FL 34990

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: KIRSTEN NELSEN PRES 02/26/2010

Electronic Signature of Signing Officer or Director Date