2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# P07000041746

Entity Name: WAKEFIELD PLACE, INC.

Current Principal Place of Business:

402 EAST 63RD STREET
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

PO BOX 12931
JACKSONVILLE, FL 32209

New Mailing Address:

FEI Number: 20-8790572 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MITCHELL-REED, MONICA
402 EAST 63RD STREET
JACKSONVILLE, FL 32208 US

Name and Address of New Registered Agent:

CORBITT, JOHN H
6618 CLEVELAND ROAD
JACKSONVILLE, FL 32209 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: JOHN H CORBITT 04/29/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PCEO ( ) Delete
Name: CORBITT, JOHN M
Address: 3610 CLYDE DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

Title: S (X) Delete
Name: MITCHELL-REED, MONICA
Address: 1416 WEST 9TH STREET
City-St-Zip: JACKSONVILLE, FL 32209

Title: S (X) Delete
Name: W. LARRY GREEN
Address: 2007 FOREST HILLS ROAD
City-St-Zip: JACKSONVILLE, FL 32208

Title: T ( ) Delete
Name: CARUTHERS, SARAH
Address: 1517 RIBAULT SCENIC DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

Title: D ( ) Delete
Name: CORBITT, CHARLIE E
Address: 4253 KATANGA DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: JOHN M CORBITT PCEO 04/29/2009
Electronic Signature of Signing Officer or Director Date