

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000041921

FILED
Apr 30, 2009
Secretary of State

Entity Name: WGL TOOLS, INC., AUTHORIZED CORNWELL TOOL DEALER

Current Principal Place of Business:

6327 LENAPE ST.
FT. PIERCE, FL 34982 US

New Principal Place of Business:

Current Mailing Address:

6327 LENAPE ST.
FT. PIERCE, FL 34982 US

New Mailing Address:

FEI Number: 26-3119937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINCOLN, JENNIFER L
6327 LENAPE ST.
FT. PIERCE, FL 34982 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: PD () Delete
Name: LINCOLN, WAYNE G
Address: 6327 LENAPE ST.
City-St-Zip: FT. PIERCE, FL 34982 US

Title: SD () Delete
Name: LINCOLN, JENNIFER L
Address: 6327 LENAPE ST.
City-St-Zip: FT. PIERCE, FL 34982 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JENNIFER LINCOLN

SD

04/30/2009

Electronic Signature of Signing Officer or Director

Date