2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000105419

Entity Name: WELLSPRING VENTURES, INC.

JACKSONVILLE, FL 32259 US

City-St-Zip:

FILED Apr 29, 2009 Secretary of State

Entity Nai	me. WELLSP	RING VENTURES, INC.					
Current P	rincipal Place	e of Business:	New Prin	New Principal Place of Business:			
	MEADOW WA VILLE, FL 322						
Current M	lailing Addres	ss:	New Mail	ing Address	s:		
	MEADOW WA VILLE, FL 322						
FEI Number:	: 30-0522214	FEI Number Applied For () FEI Number Not App	olicable ()	Certificate of Status Des	ired (X)	
Name and	Address of C	Current Registered Age	nt: Name and	d Address o	f New Registered Agen	t:	
1301 RIVE SUITE1916	RPLACE BLV		RIST				
	named entity e of Florida.	submits this statement fo	r the purpose of changing	its registered	d office or registered age	nt, or both,	
SIGNATUR	RE:						
	Electror	nic Signature of Registere	ed Agent		Date		
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS	S AND DIREC	TORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	STRATTON, EF 4532 EAST SE		Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address:	TSD () MAGDALEIN, S 4532 EAST SE		Title: Name: Address:	MAGDALEIN	(X) Change () Addition I, SAM DHILL PLACE		

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: SAM MAGDALEIN TSD 04/29/2009

JACKSONVILLE, FL 32256 US