## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000006402

FILED Jul 03, 2005 Secretary of State

Entity Name: WELLS FARM SUPPLIES, INC.	
Current Principal Place of Business:	New Principal Place of Business:
2394 NE COLIN KELLY HWY MADISON, FL 32340	
Current Mailing Address:	New Mailing Address:
2394 NE COLIN KELLY HWY MADISON, FL 32340	
FEI Number: 59-3410192 FEI Number Applied For (	) FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Ager	nt: Name and Address of New Registered Agent:
BROWNING, EDWIN B JR. RT 4 BOX 995 MADISON, FL 32340 US	
The above named entity submits this statement for in the State of Florida.	the purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registere	d Agent Date
In accordance with s. 607.193(2)(b), F.S., the corporation Election Campaign Financing Trust Fund Contribution()	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: P ( ) Delete	Title: P (X) Change ( ) Addition

() Change () Addition

WELLS, CHARLES A JR. WELLS, CHARLES A JR. Name: Name: Address: ROUTE 4, BOX 995 Address: 2394 NE COLIN KELLY HWY City-St-Zip: MADISON, FL 32340 City-St-Zip: MADISON, FL 32340

Title: VΡ (X) Delete Title: TURNER, PAT Name: Name:

Address: ROUTE 1 Address: LEE, FL 32059 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHARLES A. WELLS, JR Ρ 07/03/2005