2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# P97000029308

Entity Name: WENDOVER MANAGEMENT, INC.

Current Principal Place of Business:

615 CRESCENT EXECUTIVE CT
STE 120
LAKE MARY, FL 32746 US

New Principal Place of Business:

Current Mailing Address:

615 CRESCENT EXECUTIVE CT
STE 120
LAKE MARY, FL 32746 US

New Mailing Address:

FEI Number: 59-3437544 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRAY, N. DWAYNE JR.
201 EAST PINE STREET, SUITE 500
ORLANDO, FL 32801 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: DVT ( ) Delete
Name: WOLF, JONATHAN
Address: 1275 LAKE HEATHROW LANE, SUITE 115
City-St-Zip: HEATHROW, FL 32746

Title: DPS ( ) Delete
Name: BORCK, TODD L
Address: 615 CRESCENT EXECUTIVE CT, STE 120
City-St-Zip: LAKE MARY, FL 32746

Title: DV ( ) Delete
Name: LAW, PATRICK E
Address: 615 CRESCENT EXEC. CT. SUITE 120
City-St-Zip: LAKE MARY, FL 32746

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:

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: TODD L. BORCK DPS 03/19/2009

Electronic Signature of Signing Officer or Director Date