2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# P98000075582

Entity Name: WEL-CO DIAMOND TOOL CORP.

Current Principal Place of Business:

390 ROBERTS ROAD
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

PO BOX 1767
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: 04-2580470 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOROTA, JOSEPH J P.A.
28100 US HIGHWAY 19 NORTH
SUITE 504
CLEARWATER, FL 33761 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:	D	( ) Delete
Name:	WELCH, OWEN JR	
Address:	390 ROBERTS ROAD	
City-St-Zip:	OLDSMAR, FL 34677	
Title:	CEO	( ) Delete
Name:	WELCH, GEORGIA	
Address:	390 ROBERTS ROAD	
City-St-Zip:	OLDSMAR, FL 34677	
Title:	PR	( ) Delete
Name:	WELCH, CHRISTOPHER	
Address:	390 ROBERTS ROAD	
City-St-Zip:	OLDSMAR, FL 34677	
Title:	CFO	( ) Delete
Name:	WELCH, PAUL	
Address:	390 ROBERTS ROAD	
City-St-Zip:	OLDSMAR, FL 34677	
Title:	D	( ) Delete
Name:	SULLIVAN, COLLEEN	
Address:	390 ROBERTS ROAD	
City-St-Zip:	OLDSMAR, FL 34677	
Title:	D	( ) Delete
Name:	WELCH, KEN	
Address:	390 ROBERTS RD	
City-St-Zip:	OLDSMAR, FL 34677	

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:	VP	(X) Change ( ) Addition
Name:	WELCH, PAUL	
Address:	390 ROBERTS ROAD	
City-St-Zip:	OLDSMAR, FL 34677	
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: PAUL WELCH VP 03/24/2009

Electronic Signature of Signing Officer or Director — Date