

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000004688

Entity Name: WENDOVER FINANCIAL SERVICES CORPORATION**Current Principal Place of Business:**20408 BASHAN DRIVE, SUITE 231
ATTN: CORPORATE SECRETARY TEAM
ASHBURN, VA 20147**Current Mailing Address:**20408 BASHAN DRIVE, SUITE 231
C/O ATTN: CORPORATE SECRETARY TEAM
ASHBURN, VA 20147 US**FEI Number:** 56-1505554**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 US*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**Officer/Director Detail :**

Title	SECRETARY
Name	SURETTE, CLIFFORD
Address	20408 BASHAN DRIVE, SUITE 231
City-State-Zip:	ASHBURN VA 20147

Title	CFO, TREASURER
Name	SIMMONS, SCOTT
Address	20408 BASHAN DRIVE, SUITE 231
City-State-Zip:	ASHBURN VA 20147

Title	DIRECTOR, PRESIDENT, CEO
Name	DAVIDSON, FRED
Address	20408 BASHAN DRIVE, SUITE 231
City-State-Zip:	ASHBURN VA 20147

Title	ASST. VICE PRESIDENT
Name	KAMINSKI, WALTER
Address	20408 BASHAN DRIVE, SUITE 231
City-State-Zip:	ASHBURN VA 20147

Title	ASST. VICE PRESIDENT
Name	LEYDEN, ELIZABETH
Address	20408 BASHAN DRIVE, SUITE 231
City-State-Zip:	ASHBURN VA 20147

Title	ASST. VICE PRESIDENT
Name	LINKENHOKER, ROY L.
Address	20408 BASHAN DRIVE, SUITE 231
City-State-Zip:	ASHBURN VA 20147

I hereby 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 all other like empowered.

SIGNATURE: CLIFFORD SURETTE**SECRETARY****04/25/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date