

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715386

FILED  
Mar 11, 2012  
Secretary of State

**Entity Name:** WELLINGTON ARMS, A CONDOMINIUM, INC.

**Current Principal Place of Business:**

6530 N OCEAN BOULEVARD  
OCEAN RIDGE, FL 33435

**New Principal Place of Business:**

**Current Mailing Address:**

6530 N OCEAN BOULEVARD  
OCEAN RIDGE, FL 33435

**New Mailing Address:**

FEI Number: 59-1267105

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GEM PROPERTY MANAGEMENT,LLC  
5074 NAUTICA LAKE CIRCLE  
GREENACRES, FL 33463 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

**OFFICERS AND DIRECTORS:**

Title: T  
Name: RORKE, HERB  
Address: 6530 N OCEAN BLVD  
City-St-Zip: OCEAN RIDGE, FL 33435

Title: SECT  
Name: DOLAN, KATHY  
Address: 6530 N OCEAN BLVD #107  
City-St-Zip: OCEAN RIDGE, FL 33435

Title: PRES  
Name: NEMES, ROBERT  
Address: 6530 N. OCEAN BLVD#105  
City-St-Zip: OCEAN RIDGE, FL 33435

Title: VP  
Name: HODGKINSON, ROBERT  
Address: 6530 N. OCEAN BLVD#113  
City-St-Zip: OCEAN RIDGE, FL 33435

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT NEMES

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03/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date