

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2003 8:00 am
Secretary of State

02-20-2003 90119 046 ****61.25

DOCUMENT # 726391

1. Entity Name

WELLINGTON MANOR CONDOMINIUM, INC.



Principal Place of Business

**8901 NW 38 DR
205
CORAL SPRINGS FL 33065
US**

Mailing Address

**8901 NW 38 DR
205
CORAL SPRINGS FL 33065
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1656383**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MITCHELL, ANNA P
8901 NW 38 DR #205
CORAL SPRINGS FL 33065**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. I, 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Ann P. Mitchell

2/18/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
LANE, PEG
8903 NW 38TH DR, #104
CORAL SPRINGS FL** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Member at Large
Newton Coy
12904 SW 49 CT
MIRAMAR, FL 33027** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
MITCHELL, ANNE
8901 NW 38 DR #205
CORAL SPRINGS FL 33065** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Secretary
Anne Mitchell
8901 NW 38 Dr #205
Coral Springs, FL 33065** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MLD
BILLARD, RAY
1675 N.W. 69TH TERRACE
MARGATE FL 33063** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPO
Ray Billard
1675 NW 69 Ter
Margate, FL 33063** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
O'CONNOR, JOHN F
8903 NW 38 DR #203
CORAL SPRINGS FL 33065** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**member at Large
Kendra Anne Mazza
2440 NW 88 Ter
Coral Springs, FL 33065** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
CAROLAN, ED DR.
8901 NW 38TH DR., #206
CORAL SPRINGS FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
ABBOTT, MAUREEN
8903 NW 38 DR APT 201
CORAL SPRINGS FL 33065** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ann P. Mitchell Secretary 2/18/03

954-401-
5907

CR2E037 (10/02)