

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008572

FILED
Jan 07, 2009
Secretary of State

Entity Name: WELLINGTON SENIORS CLUB, INC.

Current Principal Place of Business:

1801 CORSICA DR.
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

1801 CORSICA DR.
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 80-0026674

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRAGER, HOWARD L
1801 CORISCA DR
WELLINGTON, FL 33414 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: P () Delete
Name: TRAGER, HOWARD L
Address: 1801 CORSICA DR
City-St-Zip: WELLINGTON, FL 33414

Title: VP () Delete
Name: MEYER, SUNNY
Address: 1151 ROWAYTON CR.
City-St-Zip: WELLINGTON, FL 33414

Title: TD () Delete
Name: RUBIN, ESTELLE
Address: 1801 CORSICA DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: SD () Delete
Name: POWERS, BARBARA
Address: 1024 LAKE BREEZE DR
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: SCHWARTZ, SALLY
Address: 2731 NEATON COURT
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: KAHLER, JOAN
Address: 13891 ISHNALA CIRCLE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: KAHLER, JOAN
Address: 13691 ISHNALA CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: TREA (X) Change () Addition
Name: RUBIN, ESTELLE
Address: 1801 CORSICA DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: RE/S (X) Change () Addition
Name: ROWE, MARY
Address: 1081 HICKORY TRAIL
City-St-Zip: WELLINGTON, FL 33414

Title: CO/S (X) Change () Addition
Name: LOGLISCI, MAE
Address: 3742 PELICAN BAY COURT
City-St-Zip: WELLINGTON, FL 33414

Title: D (X) Change () Addition
Name: ALFALLA, TONY
Address: 10733 LAKE SHORE DRIVE
City-St-Zip: WELLINGTON, FL 33414

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

SIGNATURE: HOWARD TRAGER

PRES

01/07/2009

Electronic Signature of Signing Officer or Director

Date