

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 19, 2008 08:00 AM
Secretary of State

DOCUMENT # N17612

1. Entity Name
WELLINGTON M CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**308 WELLINGTON M
WEST PALM BEACH, FL 33417 US**

Mailing Address
**308 WELLINGTON M
WEST PALM BEACH, FL 33417 US**



01152008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1606288

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CAMPAGNUOLO, FELIX
308 WELLINGTON M
WEST PALM BEACH, FL 33417**

**DO NOT WRITE
IN THIS SPACE**

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$81.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000832383
02/27/08-80057-007 61.25

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
CAMPAGNUOLO, FELIX
308 WELLINGTON M
WEST PALM BEACH, FL 33417**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
BEREST, MYRA
112 WELLINGTON M
WEST PALM BEACH, FL 33417**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
CAMPAGNUOLO, CATHY
308 WELLINGTON M
WEST PALM BEACH, FL 33417**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
LICHTEN, SELMA
110 WELLINGTON M
WEST PALM BEACH, FL 33417**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
AIRHART, JAMES
310 WELLINGTON M
WEST PALM BEACH, FL 33417**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GALE, DIANNE
314 WELLINGTON M
WEST PALM BEACH, FL 33417**

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

Felix Campagnuolo - President

2/14/08

561-242-0395