

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17612

FILED
Feb 10, 2011
Secretary of State

Entity Name: WELLINGTON M CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

314 WELLINGTON M
WEST PALM BEACH, FL 33417 US

New Principal Place of Business:

Current Mailing Address:

314 WELLINGTON M
WEST PALM BEACH, FL 33417 US

New Mailing Address:

FEI Number: 59-1606288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AIRHART, JAMES
310 WELLINGTON M
WEST PALM BEACH, FL 33417 US

Name and Address of New Registered Agent:

GALE, DIANNE
314 WELLINGTON M
WEST PALM BEACH, FL 33417 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: DIANNE L. GALE

02/10/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: DAVITT, DENNIS
Address: 103 WELLINGTON M
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: V
Name: TSEKHMEYSTER, EFIM
Address: 212 WELLINGTON M
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: S
Name: GALE, DIANNE
Address: 314 WELLINGTON M
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: T
Name: AIRHART, JAMES
Address: 310 WELLINGTON M
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D
Name: WEINBERG, STANLEY
Address: 312 WELLINGTON M
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D
Name: BEREST, SAMUAL
Address: 203 WELLINGTON M
City-St-Zip: WEST PALM BEACH, FL 33417 US

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: DIANNE L. GALE

S

02/10/2011

Electronic Signature of Signing Officer or Director

Date