

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 22, 2009  
Secretary of State**

DOCUMENT# N99000002360

Entity Name: WELLINGTON PLACE AT KENSINGTON COMMONS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O NEWELL PROPERTY MANAGEMENT  
5435 JAEGER ROAD #4  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

C/O NEWELL PROPERTY MANAGEMENT  
5435 JAEGER ROAD #4  
NAPLES, FL 34109

**New Mailing Address:**

FEI Number: 59-3570190      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NEWELL, WILLIAM A AGENT  
5435 JAEGER ROAD #4  
NAPLES, FL 34109      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: PD ( ) Delete  
Name: MCCARTHY, JOSEPH  
Address: 4385 DOVER COURT #204  
City-St-Zip: NAPLES, FL 34105

Title: VD ( ) Delete  
Name: MARSH, TERRY  
Address: 4405 DOVER COURT #404  
City-St-Zip: NAPLES, FL 34105

Title: SD ( ) Delete  
Name: NAHRA, GUS  
Address: 4475 DOVER COURT #1103  
City-St-Zip: NAPLES, FL 34105

Title: TD (X) Delete  
Name: LONDON, GARY  
Address: 4375 DOVER COURT #103  
City-St-Zip: NAPLES, FL 34105

Title: D (X) Delete  
Name: MCGRATH, MICHAEL  
Address: 4375 DOVER COURT #101  
City-St-Zip: NAPLES, FL 34105

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: WHITCROFT, BILL  
Address: 4940 WESTCHESTER COURT #3702  
City-St-Zip: NAPLES, FL 34105

Title: TD (X) Change ( ) Addition  
Name: FERRERI, PATRICIA  
Address: 4776 ALBERTON COURT #2702  
City-St-Zip: NAPLES, FL 34105

Title: SD (X) Change ( ) Addition  
Name: MCCARTHY, JOSEPH  
Address: 4385 DOVER COURT #204  
City-St-Zip: NAPLES, FL 34105

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

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

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: BILL WHITCROFT

PD

01/22/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date