## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000048553

Entity Name: WELLINGTON MANAGEMENT, INC.

FILED Jan 23, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
3461-B FAIRLANE FARMS RD WEST PALM BEACH, FL 33414				3461-B FAIRLANE FARMS RD WELLINGTON, FL 33414		
Current Mailing Address:				New Mailing Address:		
C/O CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 32301						
FEI Number: 65-0504842 FEI Number Applied For ( ) FEI			FEI Num	umber Not Applicable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 32301 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:						
Electronic Signature of Registered Agent				Date		
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VD () I KURTZ, JOHN C 100 VISTA ROYA VERO BEACH, F			Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition HN C ROYAL BLVD. CH, FL 32962
Title: Name: Address: City-St-Zip:	PD () I NEWSOME, JOH 3461-B FAIRLAN WEST PALM BE	E FARMS RD		Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition , JOHN RLANE FARMS RD DN, FL 33414
Title: Name: Address: City-St-Zip:	SOLLINS, CHAR	COMMERCE BLVD		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	SD ()[ FRIEDRICHSEN, 1140 BAY STRE TORONTO, ON I	ET		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	TD () I COOKE, DOUGL 1140 BAY STRE TORONTO, ON I	ET		Title: Name: Address: City-St-Zip:	TD COOKE, DO 1140 BAY S TORONTO,	
Title: Name: Address: City-St-Zip:	1()	Delete		Title: Name: Address: City-St-Zip:		() Change (X) Addition NG OF COMMERCE BLVD. DN, FL 33487

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WENDY LANG AS 01/23/2007