2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748337

FILED Mar 23, 2009 Secretary of State

Entity Name: WELLINGTON PRESBYTERIAN CHURCH, INC.

,		TOWN REODITION OF THE	11011, 1110.		
Current Principal Place of Business:			New Principal Place of Business:		
	INGTON TRA ON, FL 3341				
Current Mailing Address:			New Mailing Address:		
	INGTON TRA ON, FL 3341				
FEI Number:	59-1896338	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
WELLINGT	INGTON TRA ON, FL 3341 named entity s	4 US	purpose of changing it	ts registered office or registered agent, or both,	
SIGNATUR					
	Electror	ic Signature of Registered A	gent	Date	
OFFICERS	AND DIREC	TORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	HALL, JEFF 152 MONTERE	Delete Y WAY BEACH, FL 33411	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	DEWITT, BILL 1093 NORTHUM	Delete MBERLAND EACH, FL 33414	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	ST () DONEY, WILLI, 13702 EXOCTI WELLINGTON,	CA LABE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	P () PAULETTE, JEI 1768 PRIMROS WELLINGTON,	SE LANE	Title: Name: Address: City-St-Zip:	P (X) Change () Addition POULETTE, JERRY 1768 PRIMROSE LANE WELLINGTON, FL 33414	
Title: Name: Address: City-St-Zip:	AUBRY, KEVIN	Delete WOOD CIRCLE FL 33414	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: KEVIN AUBRY VP 03/23/2009