2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L0100003869 1. Entity Name WELLINGTON ACQUISITION III, LLC						03 MAY - 1 PM 12: 20			
Principal Plac	e of Business		Mailing Address			1 00 HAT 1 1112, 20			
4500 PGA BLVD SUITE 207 PALM BEACH GARDENS FL 33418			4500 PGA BLVD SUITE 207 PALM BEACH GARDENS FL 33418			SECRETARY OF STATE TALLAHASSEE, FLORIDA			
2. Principal Place of Business			3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Num	ber 65-1091296		oplied For ot Applicable	
Zip 				Country		5. Certificate of Status Desired Status Desired Fee Required			
	6. Name	and Address of Current Reg	Istered Agent	N	ame	7. Name a	nd Address of New Registere	d Agent	<u></u>
Brandt, Phillip 4500 pga blvd					Street Address (P.O. Box Number is Not Acceptable)				
	te 207 M Beach G	ARDENS FL 33418							
				С	ity		F	Zip Cod	е
	named entity ions of registe		purpose of changing its re	gistered of	ffice or register	ed agent, or b	oth, in the State of Florida. I a	m familiar with,	and accept
SIGNATURE .	Signature, typed o	r printed name of registered agent and til	tle it applicable. (NOTE: R	legistered Age	nt signature required	when reinstating)	DAT	E	
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Departm Due By May 1, 2003						nt of State			
9.		MANAGING MEMBERS/		10.			ADDITIONS/CHANG	ES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4500 PGA	PERP. TRUST HOLD.LTD. BLVD, SUITE 207	☐ Delete	NAME STREET AD CITY-ST-Z			000178499		☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PALM BE	<u>ach gardens fl 33418</u>	☐ Delete	TITLE NAME STREET AD CITY-ST-Z	MGR Judit 4500	h Galui PGA Blvd.	/U3U1U31015 , Suite 207	**50.00 Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete	TITLE NAME STREET ADI CITY-ST-Z	DRESS 4500		os , Suite 207 dens, FL 33418	☐ Change	▼ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADI CITY-ST-Z	DRESS 4500		, Suite 207 dens, FL 33418	☐ Change	⊠ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADI CITY-ST-Z	DRESS 4500 Palm		, Suite 207 dens, FL 33418	☐ Change	★ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADI CITY-ST-2				☐ Change	☐ Addition

indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: WONDOWNE REQUIREPhillip Brandt

3/27/03

Date

561/691-9050

Daytime Phone #

3R2E083 (10/0