

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715386

Entity Name: WELLINGTON ARMS, A CONDOMINIUM, INC.

Current Principal Place of Business:

BACKER ABOUD POLAKOFF & FOELSTER
400 S DIXIE HWY SUITE 420
BOCA RATON, FL 33432

Current Mailing Address:

6530 N. OCEAN BLVD
OCEAN RIDGE, FL 33435 US

FEI Number: 59-1267105

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BACK ABOUD POLIAKOFF & FOELSTER
C/O BECKER ABOUD POLIAKOFF & FOELSTER, LLP
400 S DIXIE HWY SUITE 420
BOCA RATON, FL 33432 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: BACKER ABOUD POLIAKOFF & FOELSTER

04/19/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SMITH, KERRI
Address 6530 N. OCEAN BLVD.
City-State-Zip: OCEAN RIDGE FL 33435

Title DIRECTOR
Name FUCARILE, THOMAS
Address 6530 N. OCEAN BLVD.
City-State-Zip: OCEAN RIDGE FL 33435

Title SECRETARY
Name LANE, GARY
Address 6530 N. OCEAN BLVD.
City-State-Zip: OCEAN RIDGE FL 33435

Title TREASURER
Name DOHERTY, CHRISTINA
Address 6530 N. OCEAN BLVD.
City-State-Zip: OCEAN RIDGE FL 33435

Title VP
Name DACOSTA, JACK
Address 6530 N. OCEAN BLVD
City-State-Zip: OCEAN RIDGE FL 33435

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: KERRI SMITH

PRESIDENT

04/19/2024

Electronic Signature of Signing Officer/Director Detail

Date