

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000004218

**Entity Name:** WELLINGTON CHASE HOMEOWNER'S ASSOCIATION, INC.

**FILED**  
**Apr 11, 2023**  
**Secretary of State**  
**5788568960CC**

**Current Principal Place of Business:**

ARGUS PROPERTY MANAGEMENT, INC.  
2477 STICKNEY POINT RD. SO. 118 A  
SARASOTA, FL 34233

**Current Mailing Address:**

ARGUS PROPERTY MANAGEMENT, INC.  
2477 STICKNEY POINT RD. SO. 118 A  
SARASOTA, FL 34231

**FEI Number: 59-3341391**

**Certificate of Status Desired: No**

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

ARGUS PROPERTY MANAGEMENT, INC.  
2477 STICKNEY POINT ROL 118A  
SARASOTA, FL 34231 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

**Officer/Director Detail :**

Title            SECRETARY  
Name            GURSKY, DONALD  
Address        ARGUS PROPERTY MANAGEMENT,  
                  INC.  
                  2477 STICKNEY POINT RD. SO. 118 A

Title            PRESIDENT  
Name            ESSEY, BOB  
Address        ARGUS PROPERTY MANAGEMENT,  
                  INC.  
                  2477 STICKNEY POINT RD. SO. 118 A

City-State-Zip: SARASOTA FL 34231

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Title            DIRECTOR  
Name            KELLY, ALLEN  
Address        ARGUS PROPERTY MANAGEMENT,  
                  INC.  
                  2477 STICKNEY POINT RD. SO. 118 A

Title            VP  
Name            PUCKETT, RICH  
Address        ARGUS PROPERTY MANAGEMENT,  
                  INC.  
                  2477 STICKNEY POINT RD. SO. 118 A

City-State-Zip: SARASOTA FL 34231

City-State-Zip: SARASOTA FL 34231

Title            TREASURER  
Name            FIRLIE , DANIEL  
Address        ARGUS PROPERTY MANAGEMENT,  
                  INC.  
                  2477 STICKNEY POINT RD. SO. 118 A

City-State-Zip: SARASOTA FL 34231

*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: BOB ESSEY**

**PRESIDENT**

**04/11/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date