

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 723348

(9)

1. Corporation Name

FIRST WELLINGTON, INC.



Principal Place of Business

Mailing Address

12785-C FOREST HILL BLVD.
WEST PALM BEACH FL 33414
US

11809 POLO CLUB RD
WEST PALM BC FL 33414
US

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/04/1972		3a. Date of Last Report 03/15/1995	
21		26		4. FEI Number 59-1687222		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
23		28					
Zip		Country		Zip		Country	
24		25		29		30	

9. Name and Address of Current Registered Agent

**EDGAR, CHARLES W III
C/O LEVINE FRANK AND EDGAR PA
3300 PGA BLVD SUITE 500
PALM BEACH GARDENS FL 33410**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRINK, RALPH J.	1.2 NAME	
STREET ADDRESS	244 SCARBOROUGH TERRACE	1.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RHOADS, SHERRIE	2.2 NAME	
STREET ADDRESS	1130 BARN STAPLE CIRCLE	2.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALENSCHAT, RICHARD H.	3.2 NAME	
STREET ADDRESS	1530 GRANTHAM DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	3.4 CITY-ST-ZIP	
TITLE	DP	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PICONCELLI JOSEPH	4.2 NAME	
STREET ADDRESS	2567 APPALOOSA TRAIL	4.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	UNGER GEORGE	5.2 NAME	
STREET ADDRESS	14344 DRAFT HORSE LANE	5.3 STREET ADDRESS	
CITY-ST-ZIP	WELLINGTON FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAFFE, FRAN	6.2 NAME	
STREET ADDRESS	1432 NORTHAMPTON TERRACE	6.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032, Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)

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Please add to list:

Talbot, Donna - Director
1814 Tulip Lane
West Palm Bch., FL. 33414