

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 14 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **723348** (9)
1. Corporation Name
FIRST WELLINGTON, INC.



Principal Place of Business Mailing Address
12791-A WEST FOREST HILL BLVD.
WELLINGTON FL 33414
US

3. Date Incorporated or Qualified
05/04/1972

4. FEI Number **59-1687222**
Applied For ☐ Not Applicable ☒

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country
24 25 29 USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BLEAU, DENISE J
400 SOUTH DIXIE HWY
SUITE 420
BOCA RATON FL 33432

81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 City **FL** 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

TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	FRANSETTA, TONY	
STREET ADDRESS	12059 SUNSET POINT COURT	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	TALBOT, DONNA	
STREET ADDRESS	1814 TULIP LANE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	SILVER, KARY	
STREET ADDRESS	11881 DONLIN DRIVE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	PICONCELLI JOSEPH	
STREET ADDRESS	2567 APPALOOSA TRAIL	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	UNGER GEORGE	
STREET ADDRESS	14344 DRAFT HORSE LANE	
CITY-ST-ZIP	WELLINGTON FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	DELUSSO, ALEXANDER	
STREET ADDRESS	14661 DRAFT HORSE LANE	
CITY-ST-ZIP	WEST PALM BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	OSTRY, JERRY	
1.3 STREET ADDRESS	1400 SAILBOAT CIRCLE	
1.4 CITY-ST-ZIP	WELLINGTON, FL 33414	
2.1 TITLE	DVA	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	BITTAR, LINDA	
2.3 STREET ADDRESS	14367 BELMONT TRACE	
2.4 CITY-ST-ZIP	WELLINGTON, FL 33414	
3.1 TITLE	DS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	SANDE, BRUCE	
3.3 STREET ADDRESS	1444 COLD SPRING COURT	
3.4 CITY-ST-ZIP	WELLINGTON, FL 33414	
4.1 TITLE	DT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	SCHREIER, BERNICE	
4.3 STREET ADDRESS	1462 WISTERIA ST.	
4.4 CITY-ST-ZIP	WELLINGTON, FL 33414	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 REQUIRED

4-6-98 561-641-8554

CR2E037 (10/97)

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

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OFFICERS AND DIRECTORS

TITLE VD
NAME FRANSETTA, TONY
STREET ADDRESS 12059 SUNSET POINT COURT
CITY-ST-ZIP WEST PALM BEACH FL ☒ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Director ☐ Change ☐ Addition
Joseph Picconcelli
787 Cedar Cove Road
Wellington, FL 33414

TITLE D
NAME TALBOT, DONNA
STREET ADDRESS 1814 TULIP LANE
CITY-ST-ZIP WEST PALM BEACH FL ☒ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Director ☐ Change ☐ Addition
Tony Frassetto
12059 Sunset Point Court
Wellington, FL 33414

TITLE TD
NAME SILVER, KARY
STREET ADDRESS 11881 DONLIN DRIVE
CITY-ST-ZIP WEST PALM BEACH FL ☒ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Director ☐ Change ☐ Addition
Colin Baenziger
10970 Dartford Trail #8
Wellington, FL 33414

TITLE PD
NAME PICONCELLI JOSEPH
STREET ADDRESS 2567 APPALOOSA TRAIL
CITY-ST-ZIP WEST PALM BEACH FL ☒ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE SD
NAME UNGER GEORGE
STREET ADDRESS 14344 DRAFT HORSE LANE
CITY-ST-ZIP WELLINGTON FL ☒ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME DELRUSSO, ALEXANDER
STREET ADDRESS 14861 DRAFT HORSE LANE
CITY-ST-ZIP WEST PALM BEACH FL ☒ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-6-98

Date

Phone # 0042134

CR2E037 (10/97)