

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726532

FILED
Feb 16, 2010
Secretary of State

Entity Name: THE WELLINGTON ASSOCIATION OF WINTER HAVEN, INC.

Current Principal Place of Business:

689 WEST LAKE HOWARD DRIVE
CLUBHOUSE 205
WINTER HAVEN, FL 33880

New Principal Place of Business:

689 LAKE HOWARD DRIVE, NW
CLUBHOUSE 205
WINTER HAVEN, FL 33880

Current Mailing Address:

689 WEST LAKE HOWARD DRIVE NW
CLUBHOUSE 205
WINTER HAVEN, FL 33880

New Mailing Address:

689 LAKE HOWARD DRIVE, NW
CLUBHOUSE 205
WINTER HAVEN, FL 33880

FEI Number: 59-2037339

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, MAUREEN
689 W LAKE HOWARD DR NW #3-D
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

FREY, BARBARA
689 LAKE HOWARD DR NW
CLUBHOUSE 205
WINTER HAVEN, FL 33880 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: BARBARA FREY

02/16/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: FREY, BARBARA
Address: 689 LAKE HOWARD DRIVE, NW #215
City-St-Zip: WINTER HAVEN, FL 33880

Title: VPD
Name: MILLER, JERRY
Address: 689 LAKE HOWARD DRIVE NW #121
City-St-Zip: WINTER HAVEN, FL 33880

Title: TD
Name: HILL, GERRY
Address: 689 LAKE HOWARD DRIVE NW #120
City-St-Zip: WINTER HAVEN, FL 33880

Title: SD
Name: WESTFALL, BARBARA
Address: 689 LAKE HOWARD DR. N.W. 4-E
City-St-Zip: WINTER HAVEN, FL 33880

Title: D
Name: SCHACH, JOHN
Address: 689 LAKE HOWARD DRIVE NW #3-A
City-St-Zip: WINTER HAVEN, FL 33880

Title: D
Name: ABNEY, JESSIE
Address: 689 LAKE HOWARD DR NW 127
City-St-Zip: WINTER HAVEN, FL 33880

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: BARBARA FREY

PRES

02/16/2010

Electronic Signature of Signing Officer or Director

Date