

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730533

FILED  
Jan 06, 2011  
Secretary of State

**Entity Name:** WELLEBY CONDOMINIUM ASSOCIATION ONE, INCORPORATED

**Current Principal Place of Business:**

4800 NORTH ST RD 7  
SUITE 105  
FORT LAUDERDALE, FL 33319 US

**New Principal Place of Business:**

**Current Mailing Address:**

4800 NORTH ST RD 7  
SUITE 105  
FORT LAUDERDALE, FL 33319 US

**New Mailing Address:**

**FEI Number:** 59-1716827      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

THE FRYDMAN LAW GROUP, PLLC.  
3389 SHERIDAN STREET  
#283  
HOLLYWOOD, FL 33021 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PRINCE, WILLIAM  
Address: 3581 NW 95TH TERR. #605  
City-St-Zip: SUNRISE, FL 33351

Title: DD  
Name: JOY, LINDA  
Address: 3551 NW 95 TERR #301  
City-St-Zip: SUNRISE, FL 33351

Title: DT  
Name: BROWN, WILLIAM  
Address: 8203 NW 73RD TERRACE  
City-St-Zip: TAMARAC, FL 33321

Title: VPD  
Name: DIETZMAN, RALPH  
Address: 3641 NW 95TH TERRACE #1001  
City-St-Zip: SUNRISE, FL 33351

Title: DD  
Name: SPENCER, MAXINE  
Address: 1768 HARBOR VIEW CIRCLE  
City-St-Zip: WESTON, FL 33326

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: FRANK TACHER

LCAM

01/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date