

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730593

FILED
Apr 05, 2009
Secretary of State

Entity Name: WELLINGTON CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

383 N ATLANTIC AVENUE
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

383 N ATLANTIC AVENUE
COCOA BEACH, FL 32931

New Mailing Address:

1980 N ATLANTIC AVE #701
COCOA BEACH, FL 32931

FEI Number: 59-1553292

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMENT, PHYLLIS
383 N ATLANTIC AVE
#401
COCOA BCH, FL 32931 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: P () Delete
Name: TAGGERT, RICHARD M
Address: 383 N. ATLANTIC #506
City-St-Zip: COCOA BEACH, FL 32931

Title: VP () Delete
Name: GUGLIELMO, AL
Address: 383 N. ATLANTIC #506
City-St-Zip: COCOA BEACH, FL 32931

Title: STD () Delete
Name: PHYLLIS, AMENT
Address: 383 NORTH ATLANTIC AVE #401
City-St-Zip: COCOA BEACH, FL 32931

Title: D () Delete
Name: DYMOND, JOHN
Address: 383 N. ATLANTIC #510
City-St-Zip: COCOA BEACH, FL 32931

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MCTAGGERT, RICHARD
Address: 383 N. ATLANTIC #506
City-St-Zip: COCOA BEACH, FL 32931

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DP (X) Change () Addition
Name: DYMOND, JOHN J
Address: 383 N. ATLANTIC #510
City-St-Zip: COCOA BEACH, FL 32931

Title: D () Change (X) Addition
Name: ALBER, JOHN
Address: 383 N ATLANTIC AVE #505
City-St-Zip: COCOA BEACH, FL 32931

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN DYMOND

P

04/05/2009

Electronic Signature of Signing Officer or Director

Date