2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732021

FILED Jan 21, 2006 Secretary of State

Entity Name: WELLINGTON CONDOMINIUM FEDERATION OF CENTURY VILLAGE, INC.

Current Principal Place of Business:			New Principal PI	New Principal Place of Business:	
467 WELL W PALM B	INGTON J 3CH, FL 334172509 US				
Current Mailing Address:			New Mailing Add	New Mailing Address:	
467 WELL W PALM B	INGTON J 3CH, FL 334172509 US				
FEI Number:	: 59-1630594 FEI Number A	Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	Address of Current Regis	tered Agent:	Name and Addre	ss of New Registered Agent:	
SCHUMAN 467 WELL WEST PAI	•	3			
	named entity submits this st e of Florida.	atement for the pu	rpose of changing its regis	tered office or registered agent, or both,	
SIGNATUR	RE:				
	Electronic Signature c	f Registered Agen	t	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	SD () Delete FISHERMAN, HELEN 301 WELLINGTON B W PALM BEACH, FL 33417		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () Delete EPHRAIM, MARTIN 305 WELLINGTON E WEST PALM BEACH, FL 33417	,	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () Delete WILLIS, BUNNY 223 WELLINGTON G WEST PALM BEACH, FL 33417	,	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () Delete VELGOFF, LENORE 101 WELLINGTON D WEST PALM BEACH, FL 33417	,	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () Delete SCHUMAN, SIDNEY 467 WELLINGTON J WEST PALM BEACH, FL 33417	,	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () Delete BOEHM, ROBERTA 227 WELLINGTON G WEST PALM BEACH, FL 33417	,	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: SIDNEY SCHUMAN TREA 01/21/2006