

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2008 8:00 am
Secretary of State

02-04-2008 90057 020 ****61.25

DOCUMENT # 746888

1. Entity Name
WEYBRIDGE HOMEOWNER'S ASSOCIATION, INC.



Principal Place of Business
WELLINGTON MANAGEMENT, INC
3461-B FAIRLANE RD
WELLINGTON, FL 33414 US

Mailing Address
WELLINGTON MANAGEMENT, INC
3461-B FAIRLANE RD
WELLINGTON, FL 33414 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01032008

Chg-NP

CR2E037 (12/06)

4. FEI Number
59-2498682

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

SPITZ, JAMES C
1818 S AUSTRALIAN AVE
STE 245
WEST PALM BEACH, FL 33409

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **PITTS, DAWN**
STREET ADDRESS **134-D WEYBRIDGE CIR**
CITY-ST-ZIP **ROYAL PALM BEACH, FL 33411**

TITLE **T** ☐ Delete
NAME **COCHRAN, FRANK**
STREET ADDRESS **140-A WEYBRIDGE CIR**
CITY-ST-ZIP **ROYAL PALM BEACH, FL 33411**

TITLE **VP** ☒ Delete
NAME **LADDA, BEVERLY**
STREET ADDRESS **105-A WEYBRIDGE CIR**
CITY-ST-ZIP **ROYAL PALM BEACH, FL 33411**

TITLE **S** ☒ Delete
NAME **HORSLEY, CINDY**
STREET ADDRESS **128-C WEYBRIDGE CIR**
CITY-ST-ZIP **ROYAL PALM BEACH, FL 33411**

TITLE **D** ☐ Delete
NAME **BOISVERT, NORMAN**
STREET ADDRESS **134-C WEYBRIDGE CIR**
CITY-ST-ZIP **WEST PALM BEACH, FL 33411**

TITLE **D** ☒ Delete
NAME **COCHRAN, JIMMY**
STREET ADDRESS **117-D WEYBRIDGE CIR**
CITY-ST-ZIP **WEST PALM BEACH, FL 33411**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Director** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **President** ☐ Change ☒ Addition
NAME **Beverly Cowan - Armstrong**
STREET ADDRESS **150-C Weybridge Circle**
CITY-ST-ZIP **Royal Palm Beach, FL 33411**

TITLE **Vice President** ☐ Change ☒ Addition
NAME **William Atheridge**
STREET ADDRESS **106-C Weybridge Circle**
CITY-ST-ZIP **Royal Palm Beach, FL 33411**

TITLE **Secretary** ☐ Change ☒ Addition
NAME **Tami Drew**
STREET ADDRESS **108-B Weybridge Circle**
CITY-ST-ZIP **Royal Palm Beach FL 33411**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11, if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Beverly Cowan - Armstrong** / **Beverly Armstrong** / **2/29/08** / **795-8926**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #