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Feb 21 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **751981** (2)

1. Corporation Name

FOURTH WELLINGTON, INC.

Principal Place of Business

**12785-C FOREST HILL BLVD.
WEST PALM BCH FL 33414
US**

Mailing Address

**14000 GREEN BRIAR BLVD
WELLINGTON FL 33414-7615
US**



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

04/14/1980

3a. Date of Last Report

02/15/1996

4. FEI Number

59-1989414

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**OLITZKY, EARL K
12785-C FOREST HILL BLVD.
WEST PALM BEACH FL 33414**

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	MCDONALD, TAMMY	
STREET ADDRESS	12230 FORREST HILL BLVD.	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	DV	☐ DELETE
NAME	BROWN, JEFF	
STREET ADDRESS	12230 FORREST HILL BLVD.	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	DS	☐ DELETE
NAME	DREWS, ROBERT	
STREET ADDRESS	12230 FORREST HILL BLVD.	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DP	☒ Change ☐ Addition
1.2 NAME	Anderson, Tammy	
1.3 STREET ADDRESS	12230 Forrest Hill Blvd.	
1.4 CITY-ST-ZIP	West Palm Beach, FL 33414	
2.1 TITLE	DV	☒ Change ☐ Addition
2.2 NAME	Taylor, Craig	
2.3 STREET ADDRESS	12230 Forrest Hill Blvd	
2.4 CITY-ST-ZIP	West Palm Beach, FL 33414	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Tammy Anderson* **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/97

561-790-0202

Date

Daytime Phone # 0041234

CP2E037 (9/96)