2/17/98 6 2/88 C FILE NOW: FILING FEE IS \$61.25

NONPROFIT CÖRPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 751981 (2)

FOURTH WELLINGTON, INC.				
Principal Place of Business Mailing Address				
12785-C FOREST HILL BLVD. WELLINGTON FL 33414 US		12785-C FOREST HILL BLVD. WELLINGTON FL 33414 US		3. Date Incorporated or Qualified 04/14/1980 4. FEI Number 59-1989414 Not Applied For
⊢ ¬ '	lace of Business	2a. Mailing Address		5. Certificate of Status Desired \$8.75 Additional
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Fee Required
22		27		8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & State		City & State		7. Is this nonprofit corporation a homeowners association?
23		28		⊠ Yes □ No
Ζιρ 24	Country 25	Zip 29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	9. Name and Address of Current		301 T	10. Name and Address of New Registered Agent
1	•		81 Name	
OLITZKY, EARL K			82 Street Add	dress (P.O. Box Number is Not Acceptable)
12785-C FOREST HILL BLVD.				
WEST PALM BEACH FL 33414			83	
			84 City	FL 85 Zip Code
agent I a	m familiar with, and accept the obligation of the obligation of the state of the st	tions of, Section 617,0503, Flor	rida Statutes. Registered Agent signature requ	
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	ANDERSON, TAMMY	Jan Velicik	1.2 NAME	AUNETTE COSTOLIA
STREET ADDRESS	12230 FORREST HILL BLVD.		1.3 STREET ADDRESS	ANNETTE GOSSELIN 12230 FOREST HILL BLVD WEST PALM BEACH, FL '33414
CITY-\$1-ZIP	WEST PALM BEACH FL		1.4 CITY-ST-ZIP	WEST PALM BEACH, FL 33414
TITLE	DV	DELETE	2.1 TITLE	Change 🔊 Addition
NAME	TAYLOR, CRAIG		2.2 NAME	
STREET ADDRESS	12230 FORREST HILL BLVD.		2 3 STREET ADDRESS	
CITY-ST-ZIP TITLE	WEST PALM BEACH FL DS	DELFTE	2.4 City-St-ZiP 3.1 Title	Change Addition
NAME	DREWS, ROBERT		3.2 NAME	
STREET ADDRESS	12230 FORREST HILL BLVD.		3.3 STREET ADDRESS	
CITY-\$1-ZIP	WEST PALM BEACH FL		3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP		Driete	4.4 CITY - ST - ZIP	Change Addition
TITLE		☐ DELETE	5.1 TITLE	L Change L Addition
NAME Street address			5.2 NAME 5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	

14. I 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.

6.4 CITY-ST-ZIP

ROBERT W. Drews

FILED

Feb 17 1998 8:00am

Secretary of State