2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005
Secretary of State

DOCUMENT# L13398

Entity Name: WELLINGTON SITTERS CLUB, INC.

Current Principal Place of Business:

% LILLIANE M. AGEE
P.O. BOX 816
LOXAHATCHEE, FL 33470

New Principal Place of Business:

% LILLIANE M. AGEE
334 WOOD DALE DR.
WEST PALM BEACH, FL 33414

Current Mailing Address:

% LILLIANE M. AGEE
P.O. BOX 816
LOXAHATCHEE, FL 33470

New Mailing Address:

% LILLIANE M. AGEE
334 WOOD DALE DRIVE
WEST PALM BEACH, FL 33414

FEI Number: 65-0145147 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AGEE, LILIANE M.
334 WOOD DALE DRIVE
WEST PALM BEACH, FL 33414 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVD ( ) Delete
Name: AGEE, LILIANE M.,
Address: 334 WOOD DALE DRIVE
City-St-Zip: WEST PALM BEACH, FL

Title: ST (X) Delete
Name: AGEE, LILIANE M.,
Address: 334 WOOD DALE DRIVE
City-St-Zip: WEST PALM BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LILIANE M. AGEE PRES 05/04/2005

Electronic Signature of Signing Officer or Director Date