

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006204

FILED
Apr 05, 2011
Secretary of State

Entity Name: VILLAGEWALK OF WELLINGTON HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2500 VILLAGEWALK CIRCLE
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

600 SANDTREE DRIVE
PALM BEACH GARDENS, FL 33403

New Mailing Address:

FEI Number: 65-1136316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDONALD, DONNA
600 SANDTREE DRIVE, STE. 109
PALM BEACH GARDENS, FL 33403 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

OFFICERS AND DIRECTORS:

Title: PD
Name: HUSIK, ALBRETТА
Address: 8228 XANTHUS LANE
City-St-Zip: WELLINGTON, FL 33414

Title: TD
Name: VAILLANCOURT, LINDA
Address: 8218 XANTHUS
City-St-Zip: WELLINGTON, FL 33414

Title: SD
Name: TAGG, DONNA
Address: 8254 COZUMEL LANE
City-St-Zip: WELLINGTON, FL 33414

Title: D
Name: ITZKOWITZ, LEO
Address: 8058 MONTERRAT
City-St-Zip: WELLINGTON, FL 33414

Title: D
Name: GERSTENHABER, CLIFF
Address: 8061 JOLLY HARBOUR COURT
City-St-Zip: WELLINGTON, FL 33414

Title: D
Name: COMAS, LAURA
Address: 8093 MONTERRAT
City-St-Zip: WELLINGTON, FL 33414

I hereby 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 all other like empowered.

SIGNATURE: ALBRETТА HUSIK

PD

04/05/2011

Electronic Signature of Signing Officer or Director

Date