

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006843

FILED  
Jul 17, 2006  
Secretary of State

**Entity Name:** WELLINGTON ALL-STAR CHEER AND DANCE ASSOCIATION, INC.

**Current Principal Place of Business:**

3125-21 FORTUNE WAY  
WELLINGTON, FL 334148826

**New Principal Place of Business:**

**Current Mailing Address:**

8169 NEVIS PL.  
WELLINGTON, FL 33414

**New Mailing Address:**

**FEI Number:** 65-1141101      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

RONK, MARIAN  
8169 NEVIS PLACE  
WELLINGTON, FL 334148826 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: D ( ) Delete  
Name: HAROLDO, GARCIA  
Address: 8169 NEVIS PL  
City-St-Zip: WELLINGTON, FL 33414

Title: D ( ) Delete  
Name: LAMB, LEE ANN  
Address: 1049 GOLDENROD RD.  
City-St-Zip: WELLINGTON, FL 33414

Title: D ( ) Delete  
Name: MURAE, MICHELLE  
Address: 2143 ISLAND SHORE DR.  
City-St-Zip: WELLINGTON, FL 33414

Title: D ( ) Delete  
Name: RONK, MARIAN M  
Address: 8169 NEVIS PL  
City-St-Zip: WELLINGTON, FL 33414

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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 Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HAROLDO GARCIA

DIR

07/17/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date