2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 8:00 am
Secretary of State
05-04-2005 90176 009 ****61.25

DOCUMENT # N02000009421

1. Entity Name
WELLINGTON AT OCOEE HOA, INC.

50047942

Principal Place of Business	Mailing Address
955 KELLER ROAD SUITE 1500 ALTAMONTE SPRINGS, FL 32714	P.O. BOX 770696 WINTER GARDEN, FL 34777 US

05022005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
PO Box 194	PO Box 194
Suite, Apt. #, etc.: #	Suite, Apt. #, etc.
City & State: PLYMOUTH FL	City & State: PLYMOUTH FL
Zip: 32768 Country	Zip: 32768 Country

4. FEI Number: 04-3749869 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PRIOR, THOMAS 955 KELLER ROAD SUITE 1500 ALTAMONTE SPRINGS, FL 32714	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP PRIOR, THOMAS 955 KELLER ROAD, SUITE 1500 ALTAMONTE SPRINGS, FL 32714	☑ Delete	P DIANA MASON 1234 STONEWATER CIRCLE OCOEE FL 34711	☑ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV GREENAWALT, TOM 955 KELLER ROAD , SUITE 1500 ALTAMONTE SPRINGS, FL 32714	☑ Delete	VP JEFFREY COURTERIER 2245 STEFANSHIRE AVE OCOEE, FL 34711	☑ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST WEST, EVELYN 955 KELLER ROAD, SUITE 1500 ALTAMONTE SPRINGS, FL 32714	☑ Delete	T BORIS ORTIZ 2295 STEFANSHIRE AVE OCOEE, FL 34711	☑ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	D PATRICK WILSON 1206 STONEWATER CIRCLE OCOEE, FL 34711	☐ Change	☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 5/16/05 407-889-0335
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #