## **2007 NOT-FOR-PROFIT CORPORATION**

## **ANNUAL REPORT**



FILED Aug 30, 2007 8:00 am Secretary of State

1. Entity Name WELLINGTON RUNNERS CLUB, INC.								08-30-2007	90002 02	29 ****61	.25
Principal Place of Business 14458 AUTUMN AVE WELLINGTON, FL 33414  Mailing Address 14458 AUTUMN AVE WELLINGTON, FL 33414  WELLINGTON, FL 33414							dara			811C 81318 11811 187	1(18)
Principal Place of Business - No P.O. Box #     3.			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				07052007	Chg-NP	CR2E0	37 (12/06)	
City & State			City & State				4. FEI Numbe NOT AP	PLICABLE		<del></del>	optied For ot Applicable
Zip Country				Country	5. Certificate of Status Desired S8.75 Additional Fee Required						
	6. Name	and Address of Current F	Registered Agen	ıt			7. Name and	Address of New I	Registered	Agent	
JORGENSEN, JOHN M 4400 PGA BLVD STE 800				Nam			2 O Box Numbe	r is Not Acceptabl	la)		
		NS, FL 33410									
					City			<u> </u>	FL	Zip Cod	e
	named entit tions of regist	y submits this statement for tered agent.	the purpose of o	changing its re	egistered office o	r registere	ed agent, or both	n, in the State of Fl	lorida. I am	familiar with,	and accept
CIONATURE											
SIGNATURE	Signature, typed	or printed name of registered agent a	and talle il applicable	ANOTE I							<del></del>
			and the in applicable.	(NOTE: )	Registered Agent signal	rure requireo	when reinstating)		DATE		
D	_	e is \$61.25 otember 14, 2007	9. (		paign Financing		\$5.00 May Be Added to Fees	Flo	Make chec rida Depa	k payable to	tate
10.	ue by Sep	e is \$61.25	9. I	Election Camp frust Fund Co	paign Financing ntribution.		\$5.00 May Be Added to Fees	7	Make chec rida Depa	rtment of S	tate
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I nereby certify that the information supplied with this tiling does not qualify for the exemptions contained 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 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 missive 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 a statutes, with a statute of the receiver of the composition of the composition of the composition of the receiver or mission of the composition of the receiver or mission of the composition of the receiver or mission or mi

SIGNATURE: