

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90091 010 ****61.25

DOCUMENT # N05000008145					
1. Entity Name WELLINGTON RESERVE OFFICE PARK PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business 1037 STATE ROAD 7 SUITE 111 WELLINGTON, FL 33414			Mailing Address C/O CAPITAL PROPERTY MANAGEMENT, INC. 1101 N CONGRESS AVENUE, SUITE 202 BOYNTON BEACH, FL 33426 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address P.O. Box 741269			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Boynton Bch, FL			
Zip	Country	Zip 33474	Country USA	4. FEI Number 20-4392414	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CARLSON, RICHARD W JR. 2377 CRAWFORD COURT LANTANA, FL 33462-2511			7. Name and Address of New Registered Agent Name: WEBB, KENNETH C Street Address (P.O. Box Number is Not Acceptable): 1035 STATE ROAD 7, SUITE 316 City: WELLINGTON FL Zip Code: 33414		
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: 1-25-07		
Filing Fee is \$61.25 Due by May 1, 2007			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	PD CHING, SHIH C 1037 STATE ROAD 7, SUITE 316 WELLINGTON, FL 33414	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD CARLSON, RICHARD W JR 2377 CRAWFORD CT. LANTANA, FL 334622511	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD WEBB, KENNETH C 1037 STATE ROAD 7, SUITE 316 WELLINGTON, FL 33414	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing 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 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:			DATE: 1/23/07		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					