## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000009055

FILED Feb 09, 2009 Secretary of State

Entity Name: THE WELLINGTON 12TH FAIRWAY CONDOMINIUM FOR UNITS 1305 AND 1307 ASSOCIATION,

INC

Current Principal Place of Business: New Principal Place of Business:

1461 V.F.W. PARKWAY
WEST ROXBURY, MA 02137

1461 V.F.W. PARKWAY
WEST ROXBURY, MA 02132

Current Mailing Address: New Mailing Address:

1461 V.F.W. PARKWAY
WEST ROXBURY, MA 02137

1461 V.F.W. PARKWAY
WEST ROXBURY, MA 02132

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

EAVENSON, BRADLEY B ESQ. 100 VILLAGE SQUARE CROSSING SUITE 207 PALM BEACH GARDENS, FL 33410 US

**OFFICERS AND DIRECTORS:** 

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

## Electronic Signature of Registered A

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:PD () DeleteTitle:PD (X) Change () AdditionName:ARGIROS, MICHAELName:ARGIROS, MICHAELAddress:1461 V.F.W. PARKWAYAddress:1461 V.F.W. PARKWAY

Address: 1461 V.F.W. PARKWAY

City-St-Zip: WEST ROXBURY, MA 02137

Address: 1461 V.F.W. PARKWAY

City-St-Zip: WEST ROXBURY, MA 02132

WEST ROXBURY, MA 02132

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition Name: MOULIN, ROGER Name: ROSATI, JUDY

Address: 1461 V.F.W. PARKWAY
City-St-Zip: WEST ROXBURY, MA 02137
Address: 1461 V.F.W. PARKWAY
City-St-Zip: WEST ROXBURY, MA 02137
City-St-Zip: WEST ROXBURY, MA 02137

Title: SD () Delete Title: () Change () Addition

 Name:
 COFFIN, KAREN
 Name:

 Address:
 1461 V.F.W. PARKWAY
 Address:

 City-St-Zip:
 WEST ROXBURY, MA 02137
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL ARGIROS PRES 02/09/2009