2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007563

FILED Aug 17, 2009 Secretary of State

Entity Name: WELLINGTON CLASS OF 98 REUNION, INC

Current Principal Place of Business:		New Principal Plac	New Principal Place of Business:	
	ILFORD CIRCLE TON, FL 33414 US			
Current M	lailing Address:	New Mailing Addre	ess:	
	ILFORD CIRCLE TON, FL 33414 US			
	: 35-2303922 FEI Number Applied For() FEI ce with s. 607.193(2)(b), F.S., the corporation did not recei	Number Not Applicable () ive the prior notice.	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
	UAN S ILFORD CIRCLE TON, FL 33414 US			
	named entity submits this statement for the purpose of Florida.	se of changing its registe	red office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registered Agent		Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHAN	GES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () Delete HOYOS, JUAN S 12759 GUILFORD CIRCLE WELLINGTON, FL 33414 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (X) Delete RENDA, LOUIE 16140 SYCAMORE DRIVE LOXAHATCHEE, FL 33470 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (X) Delete MALDANADO, JESSICA MS 1103 GREENPINE BLVD WEST PALM BEACH, FL 33409 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (X) Delete ASSAF, MARIAM K 13724 LILAC PLACE WELLINGTON, FL 33414 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (X) Delete REICKEL, CHRISTINA 1205 ESSEX DRIVE WELLINGTON, FL 33414 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () Delete TEZANOS, DAVID 13424 13TH PL N LOXAHATCHEE, FL 33414 US	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JUAN SEBASTIAN HOYOS PRES 08/17/2009