

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 11, 2008 8:00 am
Secretary of State

03-11-2008 90020 042 ****61.25

DOCUMENT # N07000009633

1. Entity Name

BOTTLEBRUSH CONDOMINIUMS OF WELLINGTON
CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

4575 LUCERNE LAKES BLVD. BLDG. 17-105
LAKE WORTH FL 33467

4575 LUCERNE LAKES BLVD. BLDG. 17-105
LAKE WORTH FL 33467



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

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

EDGAR, CHARLES W III
8409 N. MILITARY TRAIL
SUITE 123
PALM BEACH GARDENS FL 33410

Name

WILLIAM T. MILLS

Street Address (P.O. Box Number is Not Acceptable)

4575 LUCERNE LAKES BLVD.

BLDG. 17-105

City

LAKE WORTH

FL

Zip Code

33467

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

[Signature]

Signature, typed or printed name of registered agent and title (as printed).

(NOTE: Registered Agent signature required when reappointing)

DATE

1/24/08

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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

TITLE PVD
NAME MILLS, WILLIAM T ☐ Delete
STREET ADDRESS 4575 LUCERNE LAKES BLVD. BLDG. 17-105
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE STD
NAME MILLS, JOYCE ☐ Delete
STREET ADDRESS 4575 LUCERNE LAKES BLVD. BLDG. 17-105
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE D
NAME MILLS, ROBIN ☐ Delete
STREET ADDRESS 4575 LUCERNE LAKES BLVD. BLDG. 17-105
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE ☒ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP LAKE WORTH FL 33467

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

[Signature]

WILLIAM T. MILLS

561-491-8583
1/24/08