2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14257

FILED Apr 03, 2012 Secretary of State

Entity Name: WELLINGTON PLACE HOMEOWNERS ASSOCIATION, INC.

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

C/O A&G MANAGEMENT SERVICES 11360 FORTUNE CIRCLE, SUITE E6A WELLINGTON, FL 33414 US

Current Mailing Address: New Mailing Address:

C/O A&G MANAGEMENT SERVICES 11360 FORTUNE CIRCLE, SUITE E6A WELLINGTON, FL 33414 US

FEI Number: 65-0048133 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

A & G MANAGEMENT SVCS 11360 FORTUNE CIRCLE SUITE E6A WELLINGTON, FL 33414 US

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

OFFICERS AND DIRECTORS:

Γitle: DP

Name: TUCCINARDI, MIKE

Address: 11360 FORTUNE CIRCLE, SUITE E6A

City-St-Zip: WELLINGTON, FL 33414

Title: DVP

Name: PEPPARD, LAURA

Address: 11360 FORTUNE CIRCLE, SUITE E6A

City-St-Zip: WELLINGTON, FL 33414

Title: DS

Name: OZOROW, ELAINE

Address: 11360 FORTUNE CIRCLE, SUITE E6A

City-St-Zip: WELLINGTONG, FL 33414

Title: DT

Name: MCCOSH, DENISE

Address: 11360 FORTUNE CIRCLE, SUITE E6A

City-St-Zip: WELLINGTON, FL 33414

Title:

Name: SALINAS-BENTLEY, TAMMY
Address: 11360 FORTUNE CIRCLE, SUITE E6A

City-St-Zip: WELLINGTON, FL 33414

I hereby 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 all other like empowered.

SIGNATURE: MIKE TUCCINARDI DP 04/03/2012