2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19443

FILED Mar 12, 2010 Secretary of State

Entity Name: WELLINGTON L CONDOMINIUM ASSOCIATION, INC.

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

205 WELLINGTON L 211 WELLINGTON L

WEST PALM BEACH, FL 33417 WEST PALM BEACH, FL 33417 US US

Current Mailing Address: New Mailing Address:

SEACREST SERVICES INC WELLINGTON L C/O SEACREST SERVICES INC 2400 CENTREPARK W DR #175

2400 CENTREPARK W DR #175 WEST PALM BEACH, FL 33409 US WEST PALM BEACH, FL 33409 US

FEI Number: 59-1565360 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:

STOLOFF, SCOTT KARLAN, JACKIE DICKER, KRIVOK & STOLOFF, P.A. 105 WELLINGTON L

1818 AUSTRALIAN AVE S #400 WEST PALM BEACH, FL 33417 US WEST PALM BEACH, FL 33409 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: JACKIE KARLAN 03/12/2010

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

TORRES, DAVID Name: Address: 211 WELLINGTON L

City-St-Zip: WEST PALM BEACH, FL 33417 US

Title:

Name: KARLAN, JACKIE Address: 105 WELLINGTON L

City-St-Zip: WEST PALM BEACH, FL 33417 US

Title:

ROSENSZWEIG, SIDNEY Name: Address: 205 WELLINGTON L

City-St-Zip: WEST PALM BEACH, FL 33417 US

Title:

Name: SHORE, GLORIA Address: 102 WELLINGTON L

City-St-Zip: WEST PALM BEACH, FL 33417 US

Title:

FELLER, LARRY Name: 208 WELLINGTON L Address:

WEST PALM BEACH, FL 33417 US City-St-Zip:

Title:

BREIER, MEL Name: Address: 310 WELLINGTON L

WEST PALM BEACH, FL 33417 US City-St-Zip:

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: GALE CORONA MS 03/12/2010