

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22001

FILED
Apr 17, 2010
Secretary of State

Entity Name: WELLINGTON AT BRECKENRIDGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O CORNERSTONE ASSOCIATION MANAGEMENT INC
11940 FAIRWAY LAKES DR. SUITE 04
FORT MYERS, FL 33913 US

New Principal Place of Business:

Current Mailing Address:

C/O CORNERSTONE ASSOCIATION MANAGEMENT INC
11940 FAIRWAY LAKES DR. SUITE 04
FORT MYERS, FL 33913 US

New Mailing Address:

FEI Number: 65-0104229

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NASSOIY, SHERRY
C/O CORNERSTONE ASSOCIATION MANAGEMENT INC
11940 FAIRWAY LAKES DR. SUITE 04
FORT MYERS, FL 33913 US

Name and Address of New Registered Agent:

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:

Title: DP
Name: DEWAR, MERLIN
Address: 4160 ASHCROFT COURT #314
City-St-Zip: ESTERO, FL 33928 US

Title: DVP
Name: BOYD, BRYAN
Address: 4160 ASHCROFT COURT # 323
City-St-Zip: ESTERO, FL 33928 US

Title: DT
Name: BARINA, MICHELLE
Address: 4121 GUNNISON COURT # 1111
City-St-Zip: ESTERO, FL 33928 US

Title: DS
Name: SCIARRINO, JOSEPH
Address: 4141 GUNNISON COURT # 921
City-St-Zip: ESTERO, FL 33928 US

Title: D
Name: STEINER, GARY
Address: 4111 GUNNISON COURT # 1223
City-St-Zip: ESTERO, FL 33928 US

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: SHERRY NASSOIY

RA

04/17/2010

Electronic Signature of Signing Officer or Director

Date