

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 09, 2011
Secretary of State

DOCUMENT# N26971

Entity Name: WELLINGTON HOMES AT COUNTRYWAY HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**11839 BRANCH MOORING DRIVE
TAMPA, FL 33635 US**New Principal Place of Business:**3936 LAKE PADGETT DRIVE
LAND O' LAKES, FL 34639 US**Current Mailing Address:**11839 BRANCH MOORING DRIVE
TAMPA, FL 33635 US**New Mailing Address:**3936 LAKE PADGETT DRIVE
LAND O' LAKES, FL 34639 US**FEI Number:** 59-0198069**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DUARTE, ANTONIO III
6221 LAND O LAKES BLVD
LAND O LAKES, FL 34639 US**Name and Address of New Registered Agent:**BUSH ROSS, P.A.
1801 NORTH HIGHLAND AVENUE
TAMPA, FL 33602 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: RA

06/09/2011

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:**

Title: P
Name: BOYLAN, MICHELLE
Address: 11839 BRANCH MOORING DRIVE
City-St-Zip: TAMPA, FL 33635 US

Title: VP
Name: COFFMAN, MEREDITH
Address: 11845 BRANCH MOORING DRIVE
City-St-Zip: TAMPA, FL 33635 US

Title: SEC
Name: LINDFIELD, DESIREE
Address: 11862 BRANCH MOORING DR
City-St-Zip: TAMPA, FL 33635 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: RA

RA

06/09/2011

Electronic Signature of Signing Officer or Director_____
Date