


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # N32078 1. Entity Name WELLINGTON FOREST COMMUNITY ASSOCIATION, INC.	
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Principal Place of Business P.O. BOX 516 WINDERMERE, FL 34786 US	Mailing Address P.O. BOX 516 WINDERMERE, FL 34786 US
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04122006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2976346	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SEGGI, RONALD 3147 BLAKELY DRIVE ORLANDO, FL 32835

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2006**


9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SEGGI, RON 3147 BLAKELY DRIVE ORLANDO, FL 32835
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S IDUATE, ARMANDO 715 CANTRELL CT ORLANDO, FL 32835
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SHAW, JAMALUS A 7102 ROTHCHILD CT ORLANDO, FL 32835
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARCIA, LUIS 2900 BLAKELY DRIVE ORLANDO, FL 32835
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, CHRIS 2916 BLAKELY DRIVE ORLANDO, FL 32835
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LYNG, JOSEPH 2901 BLAKEY DR ORLANDO, FL 32835

000000513937
04/29/06-80151-007 61.25

**DO NOT WRITE
IN THIS SPACE**

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

 **Armando Iduate - April 12, 2006 407-292-1456**