2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43727

FILED May 02, 2007 Secretary of State

Entity Name: WELLINGTON STATION HOMEOWNERS' ASSOCIATION, INC.

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

1478 WELLINGTON CIR ROCKLEDGE, FL 32955

US

Current Mailing Address: New Mailing Address:

1478 WELLINGTON CIR

ROCKLEDGE, FL 32955 US

FEI Number: 59-2111989 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

EPPIA, SYLVIA EPPIG, SYLVIA

1478 WELLINGTON CIR 1478 WELLINGTON CIR US ROCKLEDGE, FL 32955 US ROCKLEDGE, FL 32955

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: SYLVIA EPPIG 05/02/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP () Delete (X) Change () Addition VALENTINE, ALLAN Name:

DOCTOR, CAROL Name: 1455 VICTORIA BLVD Address: 1494 WELLINGTON CIR Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: ROCKLEDGE, FL 32955

Title: SD () Delete Title: VD (X) Change () Addition Name: HARDY, DEBORAH Name: HILL, JANIS

Address: 1439 VICTORIA BLVD Address: 1485 WELLINGTON CIR

City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: ROCKLEDGE, FL 32955 Title: () Delete Title:

(X) Change () Addition EPPIG, SYLVIA NORONHA, DENZIL Name: Name: 1478 WELLINGTON CIR 1459 VICTORIA BLVD Address: Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: ROCKLEDGE, FL 32955

Title: () Delete Title: () Change (X) Addition Name: Name: EPPIG, SYLVIA

Address: Address: 1478 WELLINGTON CIR City-St-Zip: City-St-Zip: ROCKLEDGE, FL 32955

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SYLVIA EPPIG D 05/02/2007