
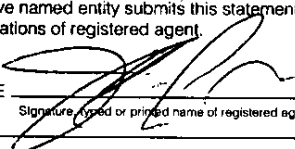
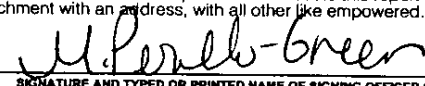


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2007 8:00 am
Secretary of State

01-31-2007 90054 024 ****61.25

DOCUMENT # N96000004537 1. Entity Name WELLINGTON CHAMBER OF COMMERCE, INC.					
Principal Place of Business 12230 FOREST HILL BLVD. SUITE 183 WELLINGTON, FL 33414			Mailing Address 12230 FOREST HILL BLVD. SUITE 183 WELLINGTON, FL 33414 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0693111	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WHISENHANT, SHAWN 12238 FOREST HILL RD BLVD, # 183 WEST PALM BEACH, FL 33414				7. Name and Address of New Registered Agent Name PARISI, JANIXX Street Address (P.O. Box Number is Not Acceptable) 12230 FOREST HILL BLVD Ste 183 WELLINGTON City FL Zip Code 33414	
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  DATE Jan 11 2007 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$81.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WHISENHANT, SHAWN 12280 SOUTHSORE BLVD WELLINGTON, FL 33414 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition JANIXX PARISI 15475 BELLANCE LANE WELLINGTON, FL 33414		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JANIXX, PARISI 15475 BELLANCE LANE WELLINGTON, FL 33414 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition SONIA REYNOLDS 12230 FOREST HILL BLVD Ste 183 WELLINGTON, FL 33414		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BLATTE, LEW 12230 FOREST HILL BLVD WELLINGTON, FL 33414 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition LEW BLATTE 12794 W FOREST HILL BLVD # 31 WELLINGTON, FL 33414		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HAHN, REBECCA SD 2573 COUNTRY GOLF DRIVE WELLINGTON, FL 33414 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition MARK BOZICEVIC 12230 FOREST HILL BLVD Ste 183 WELLINGTON, FL 33414		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANCINI, II, ANDREW D 14577 SOUTHERN BLVD LOXAHATCHEE, FL 33470 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JORGENS, GLENN 13857 WELLINGTON TRACE, STE D-2 WELLINGTON, FL 33414 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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.					
SIGNATURE:  Michael Perillo-Green 1-24-07 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> 561 7926525 <small>Daytime Phone #</small>					

40007909



01102007 Chg-NP CR2E037 (12/06)

Applied For
Not Applicable

FL 33414

Jan 11 2007

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition