2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N97000001682

I FILED
Jun 09, 2009
Secretary of State

Entity Name: WELLINGTON PATIO HOMEOWNERS ASSOCIATION, INC.

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

400 WEXFORD BLVD. SPRING HILL, FL 34609

Current Mailing Address: New Mailing Address:

9887 FOURTH STREET NORTH SUITE 301 ST. PETERSBURG, FL 33702

FEI Number: 59-3438522 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

APPLETON, ERIC
BUSH ROSS
1801 N. HIGHLAND AVENUE
TAMPA, FL 33602 US

BUSH ROSS REGISTERED AGENT SERVICES, LLC
1801 N. 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: ERIC N. APPLETON, VICE PRESIDENT 06/09/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition Name: BUDRICK, ROBERT Name:

 Address:
 11136 HEATHROW AVE
 Address:
 City-St-Zip:
 SPRING HILL, FL 34609
 City-St-Zip:

Title: VPTD () Delete Title: () Change () Addition

 Name:
 COHEN, BILL
 Name:

 Address:
 198 CENTER OAK CIRCLE
 Address:

 City-St-Zip:
 SPRING HILL, FL 34609
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 RENFRO, DIANE
 Name:

 Address:
 11333 COPLEY COURT
 Address:

 City-St-Zip:
 SPRING HILL, FL 34609
 City-St-Zip:

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: ROBERT BUDRICK PD 06/09/2009