

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 09, 2009
Secretary of State

DOCUMENT# N97000001686

Entity Name: WELLINGTON VILLA HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**400 WEXFORD BLVD.
SPRING HILL, FL 34609**New Principal Place of Business:****Current Mailing Address:**9887 FOURTH STREET NORTH
SUITE 301
ST. PETERSBURG, FL 33702**New Mailing Address:****FEI Number:** 59-3468521**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**APPLETON, ERIC
BUSH ROSS
220 SOUTH FRANKLIN STREET
TAMPA, FL 33602 US**Name and Address of New Registered Agent:**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:**Title:** SD () Delete
Name: TOOKER, BETTY
Address: 425 CANDLESTONE COURT
City-St-Zip: SPRING HILL, FL 34609**Title:** PD () Delete
Name: HOGAN, PATRICK
Address: 409 CANDLESTONE COURT
City-St-Zip: SPRING HILL, FL 34609**Title:** TD () Delete
Name: VELEZ, MILLIE
Address: 400 WEXFORD BLVD
City-St-Zip: SPRING HILL, FL 34609**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
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: PATRICK HOGAN

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06/09/2009

Electronic Signature of Signing Officer or Director

Date