

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 22, 2009
Secretary of State**

DOCUMENT# N97000006554

Entity Name: WELLINGTON PLACE AT KENSINGTON CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O NEWELL PROPERTY MANAGEMENT
5435 JAEGER ROAD #4
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

C/O NEWELL PROPERTY MANAGEMENT
5435 JAEGER ROAD #4
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 59-3515864 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWELL, WILLIAM A
C/O NEWELL PROPERTY MANAGEMENT
5435 JAEGER ROAD #4
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCCARTHY, JOSEPH
Address: 4385 DOVER COURT #204
City-St-Zip: NAPLES, FL 34105

Title: VD () Delete
Name: MARSH, TERRY
Address: 4405 DOVER COURT #404
City-St-Zip: NAPLES, FL 34105

Title: D () Delete
Name: MCGRATH, MICHAEL
Address: 4375 DOVER COURT #101
City-St-Zip: NAPLES, FL 34105

Title: SD () Delete
Name: NAHRA, GUS
Address: 4475 DOVER CRT #1103
City-St-Zip: NAPLES, FL 34105

Title: TD () Delete
Name: LONDON, GARY
Address: 4375 DOVER COURT #103
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SULLENS, JIM
Address: 4395 DOVER COURT #301
City-St-Zip: NAPLES, FL 34105

Title: TD (X) Change () Addition
Name: LONDON, GARY
Address: 4375 DOVER COURT #103
City-St-Zip: NAPLES, FL 34105

Title: D (X) Change () Addition
Name: RICCI, LOIS
Address: 4415 DOVER COURT #503
City-St-Zip: NAPLES, FL 34105

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: JOSEPH MCCARTHY

PD

01/22/2009

Electronic Signature of Signing Officer or Director

_____ Date