2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2005 08:00 AM
Secretary of State

DOCUMENT # N98000005793

1. Entity Name
BRIGHTON AT WELLINGTON'S EDGE PROPERTY OWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
BRIGHTON @ WELLINGTONS EDGE 10851 W FOREST HILL BLVD WEST PALM BEACH, FL 33414	BRIGHTON @ WELLINGTONS EDGE 10851 W FOREST HILL BLVD WEST PALM BEACH, FL 33414

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05022005 No Chg-NP CR2E037 (10/03)

4. FEI Number
65-0877905
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CAMPBELL PROPERTY MANAGEMENT
3918 VIA POINCIANA DRIVE SUITE 9
LAKE WORTH, FL 33467

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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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

000000366109
05/11/05-80030-018 61.25

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	DUSS, EGUENE
STREET ADDRESS	10679 LAKE SHORE DRIVE
CITY-ST-ZIP	WELLINGTON, FL 33414
TITLE	VPD
NAME	CALLENDO, MARGARET BARBARA KLARICH
STREET ADDRESS	10558 PELICAN DRIVE 1960 WATERSIDE CT E
CITY-ST-ZIP	WELLINGTON, FL 33414 Wellington FL 33414
TITLE	TD
NAME	NELSON, GAYLE
STREET ADDRESS	1950 WATERSIDE COURT WEST
CITY-ST-ZIP	WELLINGTON, FL 33414
TITLE	SD
NAME	RIEDER, BERNARD
STREET ADDRESS	1948 WATERSIDE COURT EAST
CITY-ST-ZIP	WELLINGTON, FL 33414
TITLE	D
NAME	COUTURE, ERIC
STREET ADDRESS	10495 PELICAN DRIVE
CITY-ST-ZIP	WELLINGTON, FL 33414
TITLE	STEVE CURTIS Vice President
NAME	
STREET ADDRESS	10589 PELICAN DRIVE
CITY-ST-ZIP	WELLINGTON FL 33414

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Steven A Curtis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #