2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005793

FILED Feb 25, 2009 Secretary of State

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

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

10851 W. FOREST HILL BLVD. WEST PALM BEACH, FL 33414

Current Mailing Address: New Mailing Address:

10851 W. FOREST HILL BLVD. WEST PALM BEACH, FL 33414

FEI Number: 65-0877905 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:

NEWSOME, JOHN % WELLINGTON MANAGEMENT 3461B FAIRLANE FARMS ROAD WELLINGTON, FL 33414 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: DUSS, EGUENE Name: DUSS, EUGENE

Address: 10679 LAKE SHORE DRIVE Address: 10679 LAKE SHORE DRIVE City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete Title: () Change () Addition

 Name:
 KLARICH, BARBARA
 Name:

 Address:
 1960 WATERSIDE CT. E.
 Address:

 City-St-Zip:
 WELLINGTON, FL 33414
 City-St-Zip:

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

 Name:
 RIEDER, BERNARD
 Name:

 Address:
 1948 WATERSIDE COURT EAST
 Address:

 City-St-Zip:
 WELLINGTON, FL 33414
 City-St-Zip:

 $\label{eq:time_time_time_time} {\sf Title:} \qquad {\sf VD} \qquad {\sf (X) \ Change \ (\) \ Addition}$

 Name:
 CURTIS, STEVE
 Name:
 CURTIS, STEVE

 Address:
 10589 PELICAN DRIVE
 Address:
 10589 PELICAN DRIVE

 City-St-Zip:
 WELLINGTON, FL 33414
 City-St-Zip:
 WELLINGTON, FL 33414

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: EUGENE DUSS PD 02/25/2009