

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jun 15, 2009
Secretary of State**

DOCUMENT# N99000001822

Entity Name: CHABAD LUBAVITCH OF WELLINGTON, INC.

Current Principal Place of Business:

1755 GRANTHAM RD.
WELLINGTON, FL 33414

New Principal Place of Business:

1755 GRANTHAM DR.
WELLINGTON, FL 33414

Current Mailing Address:

1755 GRANTHAM RD.
WELLINGTON, FL 33414

New Mailing Address:

1755 GRANTHAM DR.
WELLINGTON, FL 33414

FEI Number: 65-0911952 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GREENBERG, LAWRENCE A
1740 GRANTHAM DRIVE
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: DP () Delete
Name: MUSKAL, MENACHEM M
Address: 1755 GRANTHAM DRIVE
City-St-Zip: WELLINGTON, FL 33414

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

Title: D () Delete
Name: BEREL, BARASH
Address: 156 MORNING DEW CIRCLE
City-St-Zip: JUPITER, FL 33458

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

Title: DST () Delete
Name: LIPSZYC, ABRAHAM
Address: 1948 N.E. 123RD COURT
City-St-Zip: NORTH MIAMI, FL 33181

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: M. MUSKAL

PRES

06/15/2009

Electronic Signature of Signing Officer or Director

_____ Date