

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003364

FILED
Apr 17, 2009
Secretary of State

Entity Name: WELLINGTON REGIONAL HEALTH & EDUCATION FOUNDATION, INC.

Current Principal Place of Business:

10101 FOREST HILL BLVD.
WEST PALM BEACH, FL 33414

New Principal Place of Business:

10101 FOREST HILL BLVD.
WEST PALM BEACH, FL 33414 US

Current Mailing Address:

367 SOUTH GULPH ROAD
KING OF PRUSSIA, PA 19406

New Mailing Address:

367 SOUTH GULPH ROAD
KING OF PRUSSIA, PA 19406 US

FEI Number: 23-3004713

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DP () Delete
Name: MILLER, ALAN B
Address: 367 S. GULPH ROAD
City-St-Zip: KING OF PRUSSIA, PA 19406

Title: DT () Delete
Name: DILALLO, KEVIN
Address: 10101 FOREST HILL BLVD.
City-St-Zip: WEST PALM BEACH, FL 33414

Title: DVP () Delete
Name: RENDINA, BRUCE
Address: 10101 FOREST HILL BLVD.
City-St-Zip: WEST PALM BEACH, FL 33414

Title: S () Delete
Name: BRUNNER, GEORGE
Address: 367 S GULPH RD
City-St-Zip: KING OF PRUSSIA, PA 19406

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ALAN
Address: 367 S. GULPH ROAD
City-St-Zip: KING OF PRUSSIA, PA 19406 US

Title: D (X) Change () Addition
Name: KEVIN
Address: 10101 FOREST HILL BLVD.
City-St-Zip: WEST PALM BEACH, FL 33414 US

Title: D (X) Change () Addition
Name: BRUCE
Address: 10101 FOREST HILL BLVD.
City-St-Zip: WEST PALM BEACH, LA 34414 US

Title: S (X) Change () Addition
Name: GEORGE
Address: 367 S GULPH RD
City-St-Zip: KING OF PRUSSIA, PA 19406 US

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: GEORGE H BRUNNER JR

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04/17/2009

Electronic Signature of Signing Officer or Director

Date