

**2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 22, 2012  
Secretary of State**

DOCUMENT# N99000007462

**Entity Name:** THE WELLINGTON OFFICES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2928 WELLINGTON CIRCLE  
SUITE 201  
TALLAHASSEE, FL 32309 US

**New Principal Place of Business:**

**Current Mailing Address:**

2928 WELLINGTON CIRCLE  
SUITE 201  
TALLAHASSEE, FL 32309 US

**New Mailing Address:**

**FEI Number:** 59-3629193      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VISCONTI, FRANK L  
2928 WELLINGTON CIRCLE  
SUITE 201  
TALLAHASSEE, FL 32309 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  
Name: VISCONTI, FRANK L  
Address: 2928 WELLINGTON CIRCLE, SUITE 201  
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: ST  
Name: GOODWIN, ELLA  
Address: 2928 WELLINGTON CIRCLE, SUITE 201  
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: VPD  
Name: SANDON, FRANCES  
Address: 2928 WELLINGTON CIRCLE, SUITE 201  
City-St-Zip: TALLAHASSEE, FL 32309 US

I hereby 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 all other like empowered.

SIGNATURE: FRANK L. VISCONTI

PD

02/22/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date