2008 FOR PROFIT CORPORATION

Feb 27, 2008 8:00 am ANNUAL REPORT Secretary of State **DOCUMENT # P00000100778** 02-27-2008 90006 014 ***150.00 WELLINGTON REALTY, INC. Mailing Address Principal Place of Business C/O CORPORATION SERVICE COMPANY 3461-B FAIRLANE FARMS RD. WELLINGTON, FL 33414 1201 HAYS STREET TALLAHASSEE, FL 32301 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02182008 Chq-P CR2E034 (12/06) Applied For 4. FEI Number City & State City & State 65-1057568 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301 City Zip Code F 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. Signature, type d or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 4 Addition TITI F TITLE EUP ☐ Change ☐ Delete STEPHAN TITLEMAN KURTZ, JOHN C NAME NAME 28 TELR STREET ADDRESS 100 VISTA ROYALE BLVD STREET ADDRESS 2950 M CITY-ST-ZIP VERO BEACH, FL 32962 CITY-ST-ZIP 33020 HOUNWOOD TARECTOR Addition TITLE ☐ Delete TITLE Change STRUNIN NEWSOME, JOHN W NAME NAME RICHARD 28 TERR 3461-B FAIRLANE FARMS RD STREET ADDRESS STREET ADDRESS 2950 N 33020 CITY-ST-ZIP WELLINGTON, FL 33414 CITY-ST-ZIP Hour wood CD Delete Change Addition TITLE TITLE DIRECTOR SOLLINS, CHARLES D NAME NAME TOMAS ROSAS STREET ADDRESS 6300 PARK OF COMMERCE BLVD STREET ADDRESS 2950 M 28 TEAR BOCA RATON, FL 33487 CITY-\$T-ZIP CITY-ST-ZIP Th 33020 TITLE ☐ Delete TITLE ☐ Change ☐ Addition FRIEDRICHSEN, JOHN B NAME NAME STREET ADDRESS 1140 BAY STREET STREET ADDRESS TORONTO, ON M552B4 CITY-ST-ZIP CITY-ST-ZIP TITLE TD Detete TITLE □ Change Addition COOKE, DOUGLAS G NAME NAME STREET ADDRESS 1140 BAY STREET STREET ADDRESS CITY-ST-ZIP TORONTO, ON M552B4 CITY-ST-ZIP TITLÉ Delete TITLE ☐ Change ☐ Addition WENDY, LANG NAME NAME 6300 PARK OF COMMERCE BLVD. STREET ADDRESS STREET ADDRESS

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, 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.

CITY-ST-ZIP

SIGNATURE:

BOCA RATON, FL 33487

CITY-ST-ZIP

ller de SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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