

# 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

08 DEC 15 AM 10:57



SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



12052008 Chg-P CR2E034 (12/06)

<b>DOCUMENT # P0000100778</b> 1. Entity Name <b>WELLINGTON REALTY, INC.</b>					
Principal Place of Business <b>3461-B FAIRLANE FARMS RD. WELLINGTON, FL 33414</b>		Mailing Address <b>C/O CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301</b>			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		4. FEI Number <b>65-1057568</b>	
Applied For		Not Applicable			
5. Certificate of Status Desired		<input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>			<b>7. Name and Address of New Registered Agent</b>		
<b>CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301</b>			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			<b>FL</b>		Zip Code
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Amended AR is \$61.25</b>		9. Election Campaign Financing Trust Fund Contribution.		<input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KURTZ, JOHN C 100 VISTA ROYALE BLVD VERO BEACH, FL 32962	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP Titheman, Stephan 2950 N 28 <sup>th</sup> Ter Hollywood, FL 33020	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NEWSOME, JOHN W 3461-B FAIRLANE FARMS RD WELLINGTON, FL 33414	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Tomas Roses 2950 N 28 <sup>th</sup> Ter Hollywood, FL 33020	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD SOLLINS, CHARLES D 6300 PARK OF COMMERCE BLVD BOCA RATON, FL 33487	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Sollins Charles D. 6300 Park of Commerce Blvd. Boca Raton, FL 33487	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FRIEDRICHSEN, JOHN B 1140 BAY STREET TORONTO, ON M552B4	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Friedrichsen, John B 1140 Bay Street Toronto, ON M552B4	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD COOKE, DOUGLAS G 1140 BAY STREET TORONTO, ON M552B4	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT Cooke, Douglas G 1140 Bay Street Toronto, ON M552B4	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS WENDY, LANG 6300 PARK OF COMMERCE BLVD. BOCA RATON, FL 33487	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Lang, Wendy 6300 Park of Commerce Blvd. Boca Raton, FL 33487	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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.					
<b>SIGNATURE:</b> <u>Wendy Lang</u>		<u>12/10/08</u>		<u>054-926-1841</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

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TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NEWSOME, JOHN W 3461-B FAIRLANE FARMS RD WELLINGTON, FL 33414	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	

*Wendy Lang Sec. Treas*