

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000057251

Entity Name: WELLINGTON PILATES INC

FILED  
Jul 19, 2006  
Secretary of State

## Current Principal Place of Business:

14636 STIRRUP LANE  
WELLINGTON, FL 33414

## New Principal Place of Business:

13889 WELLINGTON TRACE  
A-21  
WELLINGTON, FL 33414

## Current Mailing Address:

14636 STIRRUP LANE  
WELLINGTON, FL 33414

## New Mailing Address:

FEI Number: 20-2696299

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PUGLISI, FRANCES  
14636 STIRRUP LANE  
WELLINGTON, FL 33414 US

## Name and Address of New Registered Agent:

PUGLISI, FRANCES M  
14636 STIRRUP LANE  
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: FRANCES M. PUGLISI

07/19/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PUGLISI, FRANCES  
Address: 14636 STIRRUP LANE  
City-St-Zip: WELLINGTON, FL 33414 US

Title: SEC ( ) Delete  
Name: PUGLISI, LEE  
Address: 14636 STIRRUP LANE  
City-St-Zip: WELLINGTON, FL 33414

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PUGLISI, FRANCES M  
Address: 14636 STIRRUP LANE  
City-St-Zip: WELLINGTON, FL 33414 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANCES M. PUGLISI

P

07/19/2006

Electronic Signature of Signing Officer or Director

Date