

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90224 046 ***150.00

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1. Entity Name

WELLINGTON MANAGEMENT, INC.



Principal Place of Business

100 VISTA ROYALE BLVD
VERO BEACH FL 32900

Mailing Address

C/O CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE FL 32301

2. Principal Place of Business

3461-B Fairlane Farms Rd.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Wellington FL

City & State

Zip

33414

Country

USA

Zip

Country

4. FEI Number

65-0504842

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE VD ☐ Delete
NAME KURTZ, JOHN C
STREET ADDRESS 100 VISTA ROYAL BLVD.
CITY-ST-ZIP VERO BEACH FL 32962

TITLE PD ☐ Delete
NAME NEWSOME, JOHN
STREET ADDRESS ~~13013 BARBERRY DRIVE~~
CITY-ST-ZIP ~~WELLINGTON FL 33414~~

TITLE CD ☐ Delete
NAME SOLLINS, CHARLES D
STREET ADDRESS 6300 PARK OF COMMERCE BLVD
CITY-ST-ZIP BOCA RATON FL 33487

TITLE SD ☐ Delete
NAME FRIEDRICHSEN, JOHN B
STREET ADDRESS 1140 BAY STREET
CITY-ST-ZIP TORONTO ON M5S2B-4

TITLE TD ☐ Delete
NAME COOKE, DOUGLAS G
STREET ADDRESS 1140 BAY STREET
CITY-ST-ZIP TORONTO ON M5S2B-4

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 3461-B Fairlane Farms Rd.
CITY-ST-ZIP Wellington FL 33414

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/06

561-795-7767

Date

Daytime Phone #