

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2007 08:00 AM
Secretary of State

DOCUMENT # P95000017670

1. Entity Name
WELLINGTON MGP CORP.



Principal Place of Business
**%NORMAN G. ORDENKER
10 WEYBOSSET ST, 10TH FLOOR
PROVIDENCE, RI 02903-2818**

Mailing Address
**%NORMAN G. ORDENKER
10 WEYBOSSET ST, 10TH FLOOR
PROVIDENCE, RI 02903-2818**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01042007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FE# Number

13-3840196

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**AXELROD, ALAN D
2500 FIRST UNION FINANCIAL CENTER
MIAMI, FL 33131**

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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
D
COHEN, DANIEL
STREET ADDRESS
ONE KENNEY DR
CITY-ST-ZIP
CRANSTON, RI 02920 ☐ Delete

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

TITLE
NAME
PP
COHEN, DANIEL
STREET ADDRESS
ONE KENNEY DR
CITY-ST-ZIP
CRANSTON, RI 02920 ☐ Delete

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

TITLE
NAME
T
BROWN, DOUGLAS
STREET ADDRESS
ONE KENNEY DR
CITY-ST-ZIP
CRANSTON, RI 02920 ☐ Delete

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

TITLE
NAME
S
ORODENKER, NORMAN G
STREET ADDRESS
10 WEYBOSSET STREET, 10TH FLOOR
CITY-ST-ZIP
PROVIDENCE, RI 02903 ☐ Delete

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

TITLE
NAME
D
SCHRETTER, BERNHARD
STREET ADDRESS
115 CONSTITUTION BLVD
CITY-ST-ZIP
FRANKLIN, MA 02038 ☐ Delete

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

TITLE
NAME
D
PORETSKY, JOEL
STREET ADDRESS
405 LEXINGTON AVE
CITY-ST-ZIP
NEW YORK, NY 10174 ☐ Delete

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

SIGNATURE:

Norman G. Ordenker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Norman G. Ordenker, Secretary

2/6/07

401-456-1333

Date

Daytime Phone #