

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000095545

Entity Name: WELLINGTON HESS, INC.

FILED
Jan 16, 2005
Secretary of State

Current Principal Place of Business:

14745 SR 80
LOXAHATCHEE, FL 33470 US

New Principal Place of Business:

Current Mailing Address:

14745 SR 80
LOXAHATCHEE, FL 33470 US

New Mailing Address:

FEI Number: 65-0631920

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDES-FAULI CORPORATE SERVICES INC.
777 SO. FLAGLER DRIVE STE 500 E
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BERGMAN, BERNARD,
Address: 12742 HEADWATER CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: S () Delete
Name: GELDZAHLE, SEYMOUR
Address: 91 LAKESHORE DR.
City-St-Zip: ROCKAWAY, NJ 07866

Title: T () Delete
Name: BERGMAN, SCOTT
Address: 12576 57TH ROAD NORTH
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: V () Delete
Name: BERGMAN, CAROL
Address: 12742 HEADWATER CIRCLE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 Section 119.07(3)(i), 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: BERNARD BERGMAN

P

01/16/2005

Electronic Signature of Signing Officer or Director

Date