

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S88760

1. Entity Name

WELLINGTON HILL FINANCIAL, INC.

FILED
Apr 14, 2000 8:00 am
Secretary of State

04-14-2000 90020 009 ***150.00

Principal Place of Business

Mailing Address

1250 9TH ST N
203-A
NAPLES FL 34102
US

1250 9TH ST N
203-A
NAPLES FL 34102-5248
US

2. Principal Place of Business

3. Mailing Address

405 Germain Ave
Suite, Apt. #, etc.

405 Germain Ave
Suite, Apt. #, etc.

City & State
NAPLES FL

City & State
NAPLES FL

4. FEI Number 65-0298989

Applied For
Not Applicable

Zip
34108

Country
Collier

Zip
34108

Country
Collier

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

HILL, ANDREW D. W.
1250 9TH ST N #203-A
NAPLES FL 34102

Address
change

Name
Same

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

405 Germain Ave

City
NAPLES FL

Zip Code
34108

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	HILL, ANDREW D. W.	1250 9TH ST N #203-A	NAPLES FL	<input checked="" type="checkbox"/> address chg
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	Andrew Hill	405 Germain Ave	NAPLES FL 34108	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 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

Date

Daytime Phone #

4/5/00 941 643 1165

CR2E034 (9/99)