## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000006754

Entity Name: WELLINGTON VIEW HOMEOWNERS ASSOCIATION, INC.

FILED
Apr 04, 2023
Secretary of State
8566614596CC

## **Current Principal Place of Business:**

C/O CAMPBELL PROPERTY MANAGEMENT 9897 LAKE WORTH ROAD SUITE 304 LAKE WORTH, FL 33467

## **Current Mailing Address:**

C/O CAMPBELL PROPERTY MANAGEMENT 9897 LAKE WORTH ROAD SUITE 304 LAKE WORTH, FL 33467 US

FEI Number: 20-2428724 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE PA 2149 NORTH COMMERCE PARKWAY WESTON, FL 33326 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: SCOTT J LEVINE, ESQ 04/04/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name CASALINO, JOSEPH Name STRONGIN, TERRY

Address C/O CAMPBELL PROPERTY Address C/O CAMPBELL PROPERTY

MANAGEMENT MANAGEMENT

9897 LAKE WORTH ROAD SUITE 304 9897 LAKE WORTH ROAD SUITE 304

City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: LAKE WORTH FL 33467

Title TREASURER Title SECRETARY

Name BINION, JAMES Name SHIRAZ, SHAMIR

Address C/O CAMPBELL PROPERTY Address % CAMPBELL PROPERTY

MANAGEMENT MANAGEMENT

9897 LAKE WORTH ROAD SUITE 304 9897 LAKE WORTH ROAD # 304

City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: LAKE WORTH FL 33467

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.