

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000003364

**Entity Name:** WELLINGTON REGIONAL HEALTH & EDUCATION  
FOUNDATION, INC.

**Current Principal Place of Business:**

10101 FOREST HILL BLVD.  
WELLINGTON, FL 33414

**Current Mailing Address:**

367 SOUTH GULPH ROAD  
KING OF PRUSSIA, PA 19406 US

**FEI Number: 31-1804705**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SYSTEM COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT AND DIRECTOR

Name           LEE, ROBBIN

Address        10101 FOREST HILL BLVD.

City-State-Zip: WELLINGTON FL 33414

Title            SECRETARY AND DIRECTOR

Name           CASSEL, SAM

Address        10101 FOREST HILL BLVD.

City-State-Zip: WELLINGTON FL 33414

*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.*

**SIGNATURE: ROBBIN LEE**

**PRESIDENT**

**04/07/2017**

Electronic Signature of Signing Officer/Director Detail

Date