

*Correct*



State of Rhode Island and Providence Plantations  
 Department of State - Business Services Division

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**Annual Report for the year: 2018**  
**Limited Liability Company**

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number <b>001670097</b>		2. Exact name of the Limited Liability Company <b>Wellington 525, LLC</b>			
3. NAICS Code 531100		4. Brief description of the character of business conducted in Rhode Island <i>time share real estate</i>			
5. State of Formation FL					
6. Principal Office Address 2026 S. Tamiami Trail			City Sarasota	State FL	Zip 34239
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Gary R. Jodat			Contact Title Mgr.		
Street Address <del>2026</del> <sup>2620</sup> S. Tamiami Trail			City Sarasota	State FL	Zip 34239
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Gary R. Jodat			Manager Name		
Street Address <del>2026</del> <sup>2620</sup> S. Tamiami Trail			Street Address		
City Sarasota	State FL	Zip 34239	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
<i>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</i>					
Name of Authorized Person Gary R. Jodat				Date 08/04/2020	
Signature of Authorized Person <i>[Handwritten Signature]</i>					

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**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

**FILED**  
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 A.A. 10:02 AM.