

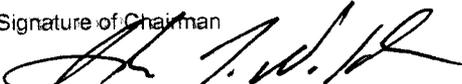
**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR
POLITICAL COMMITTEES**
(Sections 106.011(1) and 106.021(1), F.S.)

01-21-10 12:26 DC

CHECK APPROPRIATE BOX:

OFFICE USE ONLY

Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

1. Committee or Organization Preserve and Protect Wellington, Inc.		2. Telephone (561) 807-0305	
3. Name of Treasurer or Deputy Treasurer Steven T. Wilder		4. Email (optional) ()	
5. Telephone (optional) ()			
6. Mailing Address 11924 Forest Hill Blvd., Suite 10A-335, Wellington, FL 33414			
7. Street Address 11924 Forest Hill Blvd., Suite 10A-335, Wellington, FL 33414			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank Bank of America		10. Street Address 1381 Weston Road	
11. City Weston		12. State FL	13. Zip Code 33326
14. Signature of Chairman <input checked="" type="checkbox"/> 		15. Name of Chairman (Print or Type) Steven T. Wilder	

Campaign Treasurer's Acceptance of Appointment

I, Steven T. Wilder, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for Preserve and Protect Wellington, Inc.
(Committee or Organization)

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.

1/19/10
Date


Signature of Campaign Treasurer or Deputy Treasurer

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**
(Section 106.022, F.S.)

OFFICE USE ONLY

01-21-16P12:25 RCVD

- Original Appointment Change of Appointment
 Change of Mailing Address Change of Physical Address

Registered Agent and Office Information

Name Steven T. Wilder		Telephone (561) 807-0305
Street Address 11924 Forest Hill Blvd., Suite 10A-335		
City Wellington	State Florida	Zip Code 33414
Mailing Address 11924 Forest Hill Blvd., Suite 10A-335		
City Wellington	State Florida	Zip Code 33414

I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer.

Signature of Registered Agent

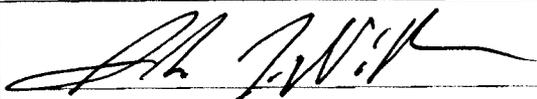
Date

Former Registered Agent and Office Information (for changes only)

Name		Telephone
Street Address		
City	State	Zip Code

Committee or Organization Information

Name of Committee or Organization Preserve and Protect Wellington, Inc.		
Street Address 11924 Forest Hill Blvd., Suite 10A-335		Telephone (561) 807-0305
City Wellington	State Florida	Zip Code 33414



Signature of Chairperson

Steven T. Wilder

Printed Name of Chairperson

1/19/16

Date

STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY

01-21-16P12:26

1. Full Name of Committee

Preserve and Protect Wellington, Inc.

Telephone

(561) 807-0305

Mailing Address (include city, state and zip code)

11924 Forest Hill Blvd., Suite 10A-335
Wellington, Florida 33414

Street Address (include city, state and zip code)

11924 Forest Hill Blvd., Suite 10A-335
Wellington, Florida 33414

2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)

Name of Affiliated or Connected Organization	Mailing Address	Relationship
N/A		

3. Area, Scope and Jurisdiction of the Committee

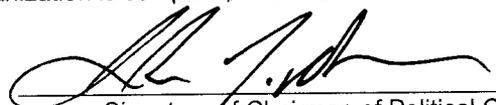
Ballot issues, referendums and charter amendments in Wellington municipal elections

4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)

Protect environment and quality of life in Wellington

5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)

Full Name	Mailing Address	Committee Title or Position
Steven T. Wilder	11924 Forest Hill Blvd., Suite 10A-335 Wellington, Florida 33414	Treasurer

6. List by Name, Address and Position, Other Principal Officers, Including Officers and Members of the Finance Committee, If Any (include chairman's name)			
Full Name	Mailing Address	Committee Title or Position	
Steven T. Wilder	11924 Forest Hill Blvd., Suite 10A-335 Wellington, Florida 33414	Chair	
7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that this Committee is Supporting (if none, please indicate)			
Full Name	Mailing Address	Office Sought	Party
N/A			
8. List Any Issues this Committee is Supporting: Wellington March 15, 2016 Election - Ballot Questions 1 & 3 List Any Issues this Committee is Opposing: To be determined			
9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party N/A			
10. In the Event of Dissolution, What Disposition will be Made of Residual Funds? Return to contributors or donate to 501(c) organization			
11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds			
Name of Bank or Depository & Account Number		Mailing Address	
Bank of America		1381 Weston Road Weston, Florida 33326	
12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addresses and Positions of Such Officials, If Any			
Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address
990 1120-POL	annually, if required annually, if required	IRS IRS	Ogden, UT Ogden, UT
STATE OF <u>Florida</u>		<u>Palm Beach</u> COUNTY	
I, <u>Steven T. Wilder</u> , certify that the information in this Statement of Organization is complete, true and correct.			
X 		<u>1/13/16</u>	
Signature of Chairman of Political Committee		Date	