2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750571

Apr 27, 2009 Secretary of State

Entity Name: SOUTHFIELDS OF PALM BEACH POLO AND COUNTRY CLUB HOMEOWNERS ASSOCIATION,

Current Principal Place of Business: New Principal Place of Business:

2328 S CONGRESS AVENUE

SUITE 2A

WEST PALM BEACH, FL 33406 US

New Mailing Address: Current Mailing Address:

2328 S CONGRESS AVENUE SUITE 2A

WEST PALM BEACH, FL 33406 US

FEI Number: 59-1990866 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

JAY STEVEN LEVINE, PA DBA LEVINE AND BURR, ATTORNEYS 3300 PGA BLVD STE 530 PALM BEACH GARDENS, FL 33410 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:

Date

Name:

Address:

Address:

City-St-Zip:

City-St-Zip:

Electronic Signature of Registered Agent

SWERDLIN, SCOTT

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

2328 S CONGRESS AVE STE 2A

WEST PALM BEACH, FL 33406

(X) Change () Addition

() Delete

CARR, AMY Name:

2328 S CONGRESS AVE STE 2A Address:

City-St-Zip: WEST PALM BEACH, FL 33406

Title: TD Title: () Delete () Change () Addition Name:

SPANO, SAL V Name:

Address: 2328 S CONGRESS AVE STE 2A City-St-Zip: WEST PALM BEACH, FL 33406

Title: () Delete Title: () Change () Addition

SHINGLER, ROGER Name: Name: 2328 S CONGRESS AVE SUITE 2A Address: Address:

City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip:

Title: () Delete Title: VΡ (X) Change () Addition

Name: STRAUB, GLENN Name: CARR, AMY

2328 S CONGRESS AVE SUITE 2A 2328 S CONGRESS AVE SUITE 2A Address: Address: City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: WEST PALM BEACH, FL 33406

Title: VPD (X) Delete Title: () Change () Addition

Name: SWEDLIN, SCOTT Name: 2328 S CONGRESS AVE SUITE 2A Address: Address: City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SAL SPANO Т 04/27/2009