## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#750818** 

FILED Feb 10, 2009 Secretary of State

Entity Name: POLO ISLAND CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 3461 B FAIRLANE FARMS RD WELLINGTON, FL 33414 **Current Mailing Address: New Mailing Address:** 3461 B FAIRLANE FARMS RD WELLINGTON, FL 33414 FEI Number: 59-1970904 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: NEWSOME, JOHN 3461 B FAIRLANE FARMS RD WELLINGTON, FL 33414 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition JACOBS, KIM JACOBS, KIM Name: Name: Address: 2730 POLO ISLAND PL A-104 Address: 2730 POLO ISLAND DR A-104 City-St-Zip: WEST PALM BEACH, FL 33414 City-St-Zip: WELLINGTON, FL 33414 Title: () Delete Title: (X) Change ( ) Addition BLUESTONE, LES Name: Name: BLUESTONE, LES Address: 2810 POLO ISLAND DR C100 Address: 2810 POLO ISLAND DR C103 City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: WELLINGTON, FL 33414 Title: PSD () Delete Title: () Change () Addition FARRINGTON, LYNDA Name: Name: 2735 POLO ISLAND DR #K202 Address: Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: ( ) Delete Title: VD Title: () Change () Addition Name: SONTA, BILL Name: 2730 POLO ISLAND DR.,#A102 Address: Address: City-St-Zip: WELLINGTON, FL 33414 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: LYNDA FARRINGTON P 02/10/2009