2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 20, 2001 08:00 AM
Secretary of State

DOCUMENT # **L99000002884**

1. Entity Name
VERO BEACH POLO, L.L.C.

Principal Place of Business	Mailing Address
6050 5TH STREET, S.W. VERO BEACH FL 32962	6050 5TH STREET, S.W. VERO BEACH FL 32962

2. Principal Place of Business	3. Mailing Address
6050 5TH STREET, S.W.	6050 5TH STREET, S.W.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: VERO BEACH FL	City & State: VERO BEACH FL
Zip: 32968 Country:	Zip: 32968 Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number: **65-0921128** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FENNELL TODD WESQ 979 BEACHLAND BOULEVARD VERO BEACH FL 32963 US	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____ **04/20/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM KAHLE GEORGE AIII 6050 5TH ST., S.W. VERO BEACH FL 32962	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM KAHLE GEORGE AIII 6050 5TH ST., S.W. VERO BEACH FL 32968	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM KAHLE SANDRA R 6050 5TH ST., S.W. VERO BEACH FL 32962	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM KAHLE SANDRA R 6050 5TH ST., S.W. VERO BEACH FL 32968	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM KAHLE GEORGE A 6050 5TH ST., S.W. VERO BEACH FL 32962	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM KAHLE GEORGE A 6050 5TH ST., S.W. VERO BEACH FL 32968	☒ Change ☐ Addition
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CR2E083 (11/00)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GEORGE A. KAHLE MGRM 04/20/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #