

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 28, 2008 08:00 AM
Secretary of State

DOCUMENT # L99000002884 1. Entity Name THE POLO GROUNDS, L.L.C.	
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Principal Place of Business 6050 5TH STREET, S.W. VERO BEACH, FL 32962	Mailing Address 6050 5TH STREET, S.W. VERO BEACH, FL 32962
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DO NOT WRITE IN THIS SPACE



01082008No Chg-LLC CR2E083 (12/07)

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 FENNELL, TODD W 979 BEACHLAND BOULEVARD VERO BEACH, FL 32963	DO NOT WRITE IN THIS SPACE
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KAHLE, GEORGE A JR 6020 5TH ST. S.W. VERO BEACH, FL 32968
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KAHLE, SANDRA R 6020 5TH ST. S.W. VERO BEACH, FL 32968
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KAHLE, GEORGE A III 6020 5TH ST. S.W. VERO BEACH, FL 32968
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01/31/08-80012-008 138.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 1/25/08 772-778-2224
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #