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Mar 17 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N22441** (2)

1. Corporation Name

**HUNTINGTON AT THE POLO CLUB HOMEOWNERS' ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

**5295 TOWN CENTER ROAD #200  
BOCA RATON FL 33486**

**5295 TOWN CENTER ROAD #200  
BOCA RATON FL 33486-1088**

3. Date Incorporated or Qualified  
**09/10/1987**

3a. Date of Last Report  
**02/21/1996**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number  
**65-0040888**

Applied For  
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐ **\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ISAACSON, WILLIAM K.  
5295 TOWN CENTER ROAD #200  
BOCA RATON FL 33486**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE **TD**  
NAME **FEUERMAN, GEORGE**  
STREET ADDRESS **17201 HUNTINGTON PARKWAY**  
CITY-ST-ZIP **BOCA RATON FL**

TITLE **D**  
NAME **JACOBSON, GERALD**  
STREET ADDRESS **17104 HUNTINGTON PARK COURT**  
CITY-ST-ZIP **BOCA RATON FL**

TITLE **D**  
NAME **STECKLOW, WILLIAM**  
STREET ADDRESS **17192 HUNTINGTON PARK WAY**  
CITY-ST-ZIP **BOCA RATON FL**

TITLE **SD**  
NAME **WILLENS, ROBERT**  
STREET ADDRESS **17136 HUNTINGTON PARKWAY**  
CITY-ST-ZIP **BOCA RATON FL**

TITLE **PD**  
NAME **GOLD, ANNE**  
STREET ADDRESS **17152 HUNTINGTON PARKWAY**  
CITY-ST-ZIP **BOCA RATON FL**

TITLE **VPD**  
NAME **SAFT, STANLEY**  
STREET ADDRESS **17176 HUNTINGTON PARK WAY**  
CITY-ST-ZIP **BOCA RATON FL**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

*George Feuerman, Treasurer*

(561)  
250-2800

CR2E037 (9/96)