

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2000 8:00 am
Secretary of State

02-25-2000 90015 046 ****70.00

DOCUMENT # N22441

1. Entity Name

HUNTINGTON AT THE POLO CLUB HOMEOWNERS' ASSOCIAT

Principal Place of Business

Mailing Address

5295 TOWN CENTER ROAD
 SUITE 200
 BOCA RATON FL 33486

5295 TOWN CENTER ROAD
 SUITE 200
 BOCA RATON FL 33486-1080

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0040888

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Delete
NAME	GOLD, ANNE	
STREET ADDRESS	17152 HUNTINGTON PARK WAY	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	MILLER, GERALD	
STREET ADDRESS	17104 HUNTINGTON PARK WAY	
CITY-ST-ZIP	BOCA RATON FL 33986	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	JACOBSON, GERALD	
STREET ADDRESS	17104 HUNTINGTON PARKWAY	
CITY-ST-ZIP	BOCA RATON FL 33986	
TITLE	SD	<input type="checkbox"/> Delete
NAME	FEIT, IRWIN	
STREET ADDRESS	17209 HUNTINGTON PARKWYA	
CITY-ST-ZIP	BOCA RATON FL 33986	
TITLE	TD	<input type="checkbox"/> Delete
NAME	FEUERMAN, GEORGE	
STREET ADDRESS	17201 HUNTINGTON PARK WAY	
CITY-ST-ZIP	BOCA RATON FL 33496	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOLD, ANNE	
STREET ADDRESS	17152 HUNTINGTON PARK WAY	
CITY-ST-ZIP	BOCA RATON, FL 33496	
TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JACOBSON, GERALD	
STREET ADDRESS	17104 HUNTINGTON PARK WAY	
CITY-ST-ZIP	BOCA RATON, FL 33496	
TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MILLER, PHILIP	
STREET ADDRESS	17112 HUNTINGTON PARK WAY	
CITY-ST-ZIP	BOCA RATON, FL 33496	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George Feuerman 2/8/00 561-241-1441

Date

Daytime Phone #

CR2E037 (9/99)

00025205



DO NOT WRITE IN THIS SPACE