2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34898

FILED Aug 31, 2004 Secretary of State

Entity Name: KNIGHTSBRIDGE OF THE POLO CLUB HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: LOUIS CAPLAN, ESQ., % SACHS, SAX & KLEIN 301 YAMATO RÓAD, SUITE 4150 BOCA RATON, FL 33431 **New Mailing Address: Current Mailing Address:** LOUIS CAPLAN, ESQ., % SACHS, SAX & KLEIN 301 YAMATO ROAD, SUITE 4150 BOCA RATON, FL 33431 FEI Number: 65-0169757 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: CAPLAN, LOUIS ESQ % SACHS, SAX & KLEIN 301 YAMATO ROAD, SUITE 4150 BOCA RATON, FL 33431 US 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 () Change () Addition BACH, HOWARD Name: Name: 16922 KNIGHTSBRIDGE LANE Address: Address: City-St-Zip: DELRAY BEACH, FL 33484 City-St-Zip: Title: () Delete Title: () Change () Addition LEVINSON, ALAN Name: Name: Address: 16926 KNIGHTSBRIDGE LANE Address: City-St-Zip: DELRAY BEACH, FL 33484 City-St-Zip: Title: STD () Delete Title: () Change () Addition RUBIN, JIM Name: Name: 16822 KNIGHTSBRIDGE LANE Address: Address: City-St-Zip: DELRAY BEACH, FL 33484 City-St-Zip: Title: () Delete Title: () Change () Addition Name: RUBIN, JOYCE Name: 16819 KNIGHTSBRIDGE LANE Address: Address: City-St-Zip: DELRAY BEACH, FL 33484 City-St-Zip: Title: () Delete Title: () Change () Addition DIAMOND, ALICE Name: Name: 16862 KNIGHTSBRIDGE LANE Address: Address: City-St-Zip: DELRAY BEACH, FL 33484 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: HOWARD BACH P 08/31/2004