

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007 8:00 am
Secretary of State

01-29-2007 90076 005 ****70.00

DOCUMENT # N22441
 1. Entity Name
 HUNTINGTON AT THE POLO CLUB HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business
 C/O LANG MANAGEMENT
 21045 COMMERCE TRAIL
 BOCA RATON, FL 33486

Mailing Address
 C/O LANG MANAGEMENT
 21045 COMMERCE TRAIL
 BOCA RATON, FL 33486

60008372



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01112007 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0040888	Applied For Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 WILLIAM K. ISAACSON,
 C/O LANG MANAGEMENT
 21045 COMMERCE TRAIL
 BOCA RATON, FL 33486

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

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GOLD, ANNE 17152 HUNTINGTON PARK WAY BOCA RATON, FL 33486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ROSENTHAL, ALLAN 17096 HUNTINGTON PARK WAY BOCA RATON, FL 33496
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HIRSCH, HOWARD 17192 HUNTINGTON PARK WAY BOCA RATON, FL 33496
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAGAN, CLAIRE 5666 HUNTINGTON PKWY BOCA RATON, FL 33496
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FR FABRICANT, EDWARD 5658 HUNTINGTON PARK CT BOCA RATON, FL 33496
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. 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 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: ALLAN ROSENTHAL TREAS 4/16/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #