

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004242

Entity Name: POLO PLAYERS SUPPORT GROUP, INC.**Current Principal Place of Business:**11924 FOREST HILL BLVD.
SUITE 10-A-287
WELLINGTON, FL 33414**Current Mailing Address:**11924 FOREST HILL BLVD.
SUITE 10-A-287
WELLINGTON, FL 33414 US**FEI Number:** 65-1122507**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THE MORIARTY LAW FIRM, P.A.
1001 3RD AVE. WEST
SUITE 650
BRADENTON, FL 34205 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:** BRENDEN S. MORIARTY

01/30/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DPT
Name OFFEN, DAVID
Address 11924 FOREST HILL BLVD.
SUITE 10-A-287
City-State-Zip: WELLINGTON FL 33414

Title DS
Name COPPOLA, ANTHONY
Address 11924 FOREST HILL BLVD.
SUITE 10-A-287
City-State-Zip: WELLINGTON FL 33414

Title D
Name MORIARTY, BRENDEN S
Address 1001 3RD AVE. WEST, SUITE 650
City-State-Zip: BRADENTON FL 34205

Title D
Name OFFEN, TODD
Address 11924 FOREST HILL BLVD.
SUITE 10-A-287
City-State-Zip: WELLINGTON FL 33414

Title DVP
Name GANNON, TIM
Address 11924 FOREST HILL BLVD.
SUITE 10-A-287
City-State-Zip: WELLINGTON FL 33414

Title D
Name ORTHWEIN, VIRGINIA
Address 2730 S. LINDBERGH BLVD.
City-State-Zip: ST. LOUIS MO 63131

I hereby 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 all other like empowered.

SIGNATURE: DAVID OFFEN

DPT

01/30/2019

Electronic Signature of Signing Officer/Director Detail

Date