

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000003936

**FILED  
Apr 10, 2016  
Secretary of State  
CC6230124349**

**Entity Name:** FLAGLER BEACH POLO CLUB HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

411 S CENTRAL AVE STE B  
FLAGLER BEACH, FL 32136

**Current Mailing Address:**

411 S CENTRAL AVE STE B  
FLAGLER BEACH, FL 32136 US

**FEI Number: 51-0521436**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PREFERRED MANAGEMENT SERVICES INC  
411 S CENTRAL AVE STE B  
FLAGLER BEACH, FL 32136 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: LEA STOKES**

**04/10/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name MUCCILOLO, PAUL  
Address 411 S CENTRAL AVE STE B  
City-State-Zip: FLAGLER BCH FL 32136

Title VP  
Name MCGEE, SHAWN  
Address 411 S CENTRAL AVE STE B  
City-State-Zip: FLAGLER BEACH FL 32136

Title ST  
Name COOKE, TOM  
Address 411 S CENTRAL AVE STE B  
City-State-Zip: FLAGLER BCH FL 32136

Title D  
Name HARRISON, ROBERT  
Address 411 S CENTRAL AVE STE B  
City-State-Zip: FLAGLER BEACH FL 32136

Title DIRECTOR  
Name MATTHEWS, L CHARLENE  
Address 411 S CENTRAL AVE STE B  
City-State-Zip: FLAGLER BEACH FL 32136

*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: PAUL MUCCILOLO**

**VICE PRESIDENT**

**04/10/2016**

Electronic Signature of Signing Officer/Director Detail

Date