

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22441

**Entity Name:** HUNTINGTON AT THE POLO CLUB HOMEOWNERS' ASSOCIATION, INC.**FILED**  
**Mar 02, 2017**  
**Secretary of State**  
**CC5224268398****Current Principal Place of Business:**C/O CREST MANAGEMENT GROUP, INC.  
6413 CONGRESS AVENUE 100  
BOCA RATON, FL 33487**Current Mailing Address:**6413 CONGRESS AVENUE  
100  
BOCA RATON, FL 33487 US**FEI Number:** 65-0040888**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BUDD, GARY  
C/O CREST MANAGEMENT GROUP, INC.  
6413 CONGRESS AVENUE 100  
BOCA RATON, FL 33487 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:** GARY BUDD

03/02/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	BERMAN, DR. KENNETH
Address	6413 CONGRESS AVENUE 100
City-State-Zip:	BOCA RATON FL 33487

Title	TREASURER
Name	COHEN, STEWART M.
Address	6413 CONGRESS AVENUE 100
City-State-Zip:	BOCA RATON FL 33487

Title	DIRECTOR
Name	BRODY, MARK
Address	6413 CONGRESS AVENUE 100
City-State-Zip:	BOCA RATON FL 33487

Title	SECRETARY
Name	KILROY, NINA R.
Address	6413 CONGRESS AVENUE 100
City-State-Zip:	BOCA RATON FL 33487

Title	VP
Name	SCHWARTZ, (COOKIE) JERILYN
Address	6413 CONGRESS AVENUE 100
City-State-Zip:	BOCA RATON FL 33487

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:** DR. KENNETH BERMAN

PRESIDENT

03/02/2017

Electronic Signature of Signing Officer/Director Detail

Date