2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001496

Entity Name: POLO PARK EAST RO ASSOCIATION, INC.

FILED Feb 21, 2019 Secretary of State 9947013262CC

Current Principal Place of Business:

525 POLO PARK EAST BLVD DAVENPORT, FL 33897

Current Mailing Address:

525 POLO PARK EAST BLVD DAVENPORT, FL 33897 US

FEI Number: 59-3372280 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COOK, DONALD JAMES POLO PARK EAST BLVD. 525 POLO PARK EAST RO INC DAVENPORT, FL 33897 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: DONALD JAMES COOK 02/21/2019

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRES Title DIRECTOR, SECRETARY

NameBOSS, GARYNameLEWIS, HELENAddress314 JOANNE DRAddress338 JOANNE DR.

City-State-Zip: DAVENPORT FL 33897 City-State-Zip: DAVENPORT FL 33897

Title DIRECTOR Title VP

Name KALLBERG, STEVE Name COOK, DONALD

Address 104 SUE AVENUE Address 525 POLO PARK EAST BLVD
City-State-Zip: DAVENPORT FL 33897 City-State-Zip: DAVENPORT FL 33897

TitleDIRECTORTitleTREASURERNameYOERGER, JOSEPHNameNADEAU, PERRY

Address 543 DREAMA DR. Address 809 POLO PARK EAST BLVD

City-State-Zip: DAVENPORT FL 33897 City-State-Zip: DAVENPORT FL 33897

Title DIRECTOR Title DIRECTOR

Name PARTINGTON, GUY Name SARGEANT, KAREN

Address 535 DREAMA DR Address 324 SUE AVE

City-State-Zip: DAVENPORT FL 33897 City-State-Zip: DAVENPORT FL 33897

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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: DONALD JAMES COOK

02/21/2019

Date

Officer/Director Detail Continued:

Title DIRECTOR
Name HATLEY, LC

Address 669 DREAMA DR

City-State-Zip: DAVENPORT FL 33897