

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P32089

**Entity Name:** POLEN CAPITAL MANAGEMENT, INC.

**Current Principal Place of Business:**

1825 NW CORPORATE BLVD  
SUITE 300  
BOCA RATON, FL 33431

**FILED**  
**Aug 29, 2014**  
**Secretary of State**  
**CC3446442385**

**Current Mailing Address:**

1825 NW CORPORATE BLVD  
SUITE 300  
BOCA RATON, FL 33431 US

**FEI Number: 13-2984374**

**Certificate of Status Desired: No**

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

MOSS, STAN C.  
1825 NW CORPORATE BLVD  
SUITE 300  
BOCA RATON, FL 33431 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MOSS, STAN C  
Address        1825 NW CORPORATE BLVD  
                 SUITE 300  
City-State-Zip: BOCA RATON FL 33431

Title            COS  
Name            MOSS, STAN C  
Address        1825 NW CORPORATE BLVD  
                 SUITE 300  
City-State-Zip: BOCA RATON FL 33431

Title            VP  
Name            DAVIDOWITZ, DANIEL  
Address        1825 NW CORPORATE BLVD  
                 SUITE 300  
City-State-Zip: BOCA RATON FL 33431

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: STAN MOSS**

**PRESIDENT**

**08/29/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date