## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 282639**

Entity Name: FLORIDA POLO INC

LIDMAN, ROBERT

411 GREAT CIRCLE ROAD

NASHVILLE, TN 37228

Name:

Address:

City-St-Zip:

FILED Apr 09, 2009 Secretary of State

Entity Na	me: FLORIDA	A POLO, INC.				
Current Principal Place of Business:			New Principal Place of Business:			
4550 POL LAKE WO	O ROAD RTH, FL 3346	73718				
Current Mailing Address:			New Mailing Address:			
4550 POLO LAKE WO	O ROAD RTH, FL 3346	73718				
FEI Number	: 59-1096396	FEI Number Applied For ( )	FEI Number Not Applicab	le ( ) Certificate of Status Desired ( )		
Name and	d Address of C	Current Registered Agent:	Name and Ad	dress of New Registered Agent:		
	NDE R NL PALM WAY NCH, FL 33480	) US				
	e named entity e of Florida.	submits this statement for the	purpose of changing its re	egistered office or registered agent, or both,		
SIGNATU	RE:					
Electronic Signature of Registered Age			gent	Date		
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/C	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( ) AVERSANO, R 2643 SHELTIN WELLINGTON,	GHAM DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	DOUGHERTY,	ARK PLACE #100	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	BYRD, WADE	LM WAY STE 409	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title:	Т (	) Delete	Title: T	(X) Change ( ) Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Name:

Address:

City-St-Zip:

LIPMAN, ROBERT

411 GREAT CIRCLE ROAD

NASHVILLE, TN 37228

SIGNATURE: RANDY AVERSANO PRES 04/09/2009