


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2007 08:00 AM
Secretary of State

DOCUMENT # 744838		
1. Entity Name PALM BEACH POLO AND COUNTRY CLUB PROPERTY OWNERS' ASSOCIATION, INC.		
Principal Place of Business 11199 POLO CLUB RD WELINGTON, FL 33414 US	Mailing Address 11199 POLO CLUB RD WELINGTON, FL 33414 US	

DO NOT WRITE IN THIS SPACE



01032007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-1877090	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**GALLE, CRAIG
11199 POLO CLUB RD
WELINGTON, FL 33414**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALLE, CRAIG 11198 POLO CLUB RD WELINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARCIA, CALIXTO 11198 POLO CLUB ROAD WELINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUSHEY, ROBERT 11198 POLO CLUB RD WELINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAL SPANO 11198 POLO CLUB ROAD WELINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANCIANESE, PERRY 11198 POLO CLUB RD WELINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SERGEANT, ANGELA 11198 POLO CLUB ROAD WELINGTON, FL 33414

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01/17/07-80079-021 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Sal Spano Director - President 1/3/07 561-798-7113