

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744838

FILED
Jan 14, 2009
Secretary of State

Entity Name: PALM BEACH POLO AND COUNTRY CLUB PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

11199 POLO CLUB RD
WELINGTON, FL 33414 US

New Principal Place of Business:

11198 POLO CLUB RD
WELINGTON, FL 33414 US

Current Mailing Address:

11199 POLO CLUB RD
WELINGTON, FL 33414 US

New Mailing Address:

11198 POLO CLUB RD
WELINGTON, FL 33414 US

FEI Number: 59-1877090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

PALM BEACH POLO & COUNTRY CLUB, POA INC
11198 POLO CLUB RD
WELINGTON, FL 33414 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: SAL V. SPANO PRESIDENT

01/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GALLE, CRAIG
Address: 11198 POLO CLUB RD
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: GARCIA, CALIXTO
Address: 11198 POLO CLUB ROAD
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: BUSHEY, ROBERT
Address: 11198 POLO CLUB RD
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: SAL SPANO,
Address: 11198 POLO CLUB ROAD
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: LANCIANESE, PERRY
Address: 11198 POLO CLUB RD
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: SERGEANT, ANGELA
Address: 11198 POLO CLUB ROAD
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NELSON, MIKE
Address: 11198 POLO CLUB RD
City-St-Zip: WELLINGTON, FL 33414

Title: D (X) Change () Addition
Name: FIALCO, KATHY
Address: 11198 POLO CLUB ROAD
City-St-Zip: WELLINGTON, FL 33414

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: SAL V. SPANO

PRES

01/14/2009

Electronic Signature of Signing Officer or Director

Date