2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2008 8:00 am
Secretary of State
03-19-2008 90021 006 ****61.25

DOCUMENT # 750571

1. Entity Name
SOUTHFIELDS OF PALM BEACH POLO AND COUNTRY CLUB HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2328 S CONGRESS AVENUE SUITE 2A WEST PALM BEACH, FL 33406 US	2328 S CONGRESS AVENUE SUITE 2A WEST PALM BEACH, FL 33406 US

400480564

02062008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1990866 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JAY STEVEN LEVINE, PA DBA LEVINE AND BURR, ATTORNEYS 3300 PGA BLVD STE 530 PALM BEACH GARDENS, FL 33410	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MORTON, VAL 2328 S CONGRESS AVE SUITE 2A WEST PALM BEACH, FL 33406	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CARR, AMY 2328 S. CONGRESS AVE., SUITE 2A WEST PALM BEACH, FL 33406	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SPANO, SAL V 2328 S CONGRESS AVE SUITE 2A WEST PALM BEACH, FL 33406	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SPANO, SAL V 2328 S. CONGRESS AVE., SUITE 2A WEST PALM BEACH, FL 33406	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHINGLER, ROGER 2328 S CONGRESS AVE SUITE 2A WEST PALM BEACH, FL 33406	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SHINGLER, ROGER 2328 S. CONGRESS AVE., SUITE 2A WEST PALM BEACH, FL 33406	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STRAUB, GLENN 2328 S CONGRESS AVE SUITE 2A WEST PALM BEACH, FL 33406	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TSD SWERDLIN, SCOT 2328 S CONGRESS AVE SUITE 2A WEST PALM BEACH, FL 33406	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SWERDLIN, SCOTT 2328 S. CONGRESS AVE., SUITE 2A WEST PALM BEACH, FL 33406	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: _____ Director 2-29-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #