

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768267

FILED
Jun 02, 2009
Secretary of State

Entity Name: POLO PARK HOME OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

1744 CHALLENGER AVE
DAVENPORT, FL 33897 US

New Principal Place of Business:

Current Mailing Address:

1744 CHALLENGER AVE
DAVENPORT, FL 33897 US

New Mailing Address:

FEI Number: 59-2306044 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BENNETT, SEANNA
1744 CHALLENGER AVE
DAVENPORT, FL 33837 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TORCELLO, ELLIE
Address: 1744 CHALLENGER AVE.
City-St-Zip: DAVENPORT, FL 33897

Title: DV () Delete
Name: BISSELL, DAWN
Address: 1744 CHALLENGER AVENUE
City-St-Zip: DAVENPORT, FL 33897

Title: PD () Delete
Name: BENNETT, SEANNA
Address: 1744 CHALLENGER AVENUE
City-St-Zip: DAVENPORT, FL 33897

Title: D () Delete
Name: MEIER, MICHAEL
Address: 1744 CHALLENGER AVE
City-St-Zip: DAVENPORT, FL 33897

Title: DS () Delete
Name: SIDKEY, LYNN
Address: 1744 CHALLENGER AVE.
City-St-Zip: DAVENPORT, FL 33897

Title: T () Delete
Name: WISE, ETHEL+
Address: 1744 CHALLENGER AVENUE
City-St-Zip: DAVENPORT, FL 33897

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DV (X) Change () Addition
Name: HISS, JIM
Address: 1744 CHALLENGER AVENUE
City-St-Zip: DAVENPORT, FL 33897

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: SEANNA BENNETT

PD

06/02/2009

Electronic Signature of Signing Officer or Director

Date