

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G32849

1. Entity Name

POLO PARK DEVELOPERS, INC.

FILED
Jan 16, 2001 8:00 am
Secretary of State

01-16-2001 90056 007 ***150.00

Principal Place of Business

Mailing Address

C/O POLO PARK, LTD.
12525 US HIGHWAY 27 N
DAVENPORT FL 32803
US

12525 US HWY 27N
12525 US HIGHWAY 27 N
DAVENPORT FL 33837
US

00003494



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

12222 US Highway 27N
Suite, Apt. #, etc.

12222 US Highway 27N
Suite, Apt. #, etc.

City & State

City & State

Davenport FL 33837

Davenport FL

4. FEI Number

59-2280672

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

BORNSTEIN, DAVID S
12525 US HIGHWAY 27 NORTH
DAVENPORT FL 33837

Name

Bornstein, David S 1803

Street Address (P.O. Box Number is Not Acceptable)

City

12222 US Highway 27 North 1803
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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)



FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
BORNSTEIN, DAVID S
12222 US HIGHWAY 27 NORTH
DAVENPORT FL 33837



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
BORNSTEIN, RITA
12222 US HIGHWAY 27 NORTH
DAVENPORT FL 33837



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
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CITY-ST-ZIP
Change Addition

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CITY-ST-ZIP



TITLE
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STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 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 #

David Bornstein

1/18/01 5834242403

CR2E034 (10/00)

0530323