

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000043191

FILED
May 12, 2006
Secretary of State

Entity Name: NEW POLO INVESTMENT CO. LLC

Current Principal Place of Business:

3802 A GUNN HWY
TAMPA, FL 33624

New Principal Place of Business:

15100 HUTCHISON ROAD
TAMPA, FL 33625

Current Mailing Address:

3802 A GUNN HWY
TAMPA, FL 33624

New Mailing Address:

15100 HUTCHISON ROAD
TAMPA, FL 33625

FEI Number: 90-0226613 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PONTON, LANCE
3802 A GUNN HWY
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

PONTON, LANCE
15100 HUTCHISON ROD
TAMPA, FL 33625 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: LANCE PONTON

05/12/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PONTON, LANCE
Address: 3802 A GUNN HWY
City-St-Zip: TAMPA, FL 33624

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PONTON, LANCE
Address: 15100 HUTCHISON ROAD
City-St-Zip: TAMPA, FL 33625 US

Title: MGRM () Change (X) Addition
Name: ALLISON, ROBERT
Address: 15100 HUTCHISON RD
City-St-Zip: TAMPA, FL 33625 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LANCE PONTON

MGMR

05/12/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date