

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008937

FILED
Mar 11, 2009
Secretary of State

Entity Name: POLO RIDGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3960 N. OCEAN BLVD., UNIT 1
DELRAY BEACH, FL 33483

New Principal Place of Business:

3960 N. OCEAN BLVD., UNIT 5
DELRAY BEACH, FL 33483

Current Mailing Address:

3960 N. OCEAN BLVD., UNIT 1
DELRAY BEACH, FL 33483

New Mailing Address:

3960 NORTH OCEAN BLVD., FIVE
DELRAY BEACH, FL 33483

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MONAGHAN, TIMOTHY E
54 N.E. FOURTH AVE.
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

MONAGHAN, TIMOTHY E
54 N.E. FOURTH AVENUE
DELRAY BEACH, FL 33483 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:

03/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BALLAS, PETER G MD
Address: 3960 N. OCEAN BLVD UNIT 1
City-St-Zip: DELRAY BEACH, FL 33483

Title: P () Delete
Name: PETERSEN, RONALD D
Address: 3960 N. OCEAN BLVD UNIT 5
City-St-Zip: DELRAY BEACH, FL 33483

Title: D () Delete
Name: WEISS, WILLIAM
Address: 3960 N. OCEAN BLVD UNIT 6
City-St-Zip: DELRAY BEACH, FL 33483

Title: D () Delete
Name: ARTHUR, BRYANT
Address: 3960 N OCEAN BLVD UNIT 4
City-St-Zip: DELRAY BEACH, FL 33483

Title: D (X) Delete
Name: ALPER, JOHN
Address: 3960 N OCEAN BLVD, UNIT 7
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PEDERSEN, RONALD
Address: 3960 NORTH OCEAN BLVD., UNIT 5
City-St-Zip: DELRAY BEACH, FL 33483

Title: D (X) Change () Addition
Name: ALPER, JOHN
Address: 3960 N. OCEAN BLVD UNIT 7
City-St-Zip: DELRAY BEACH, FL 33483

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: RONALD PEDERSEN

P

03/11/2009

Electronic Signature of Signing Officer or Director

Date