2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001724

Title:

Name:

Address:

City-St-Zip:

Entity Name: FLORIDA POLOCROSSE ASSOCIATION, INC.

FILED Sep 06, 2006 Secretary of State

Current Pr	incipal Place of	f Business:	New Princ	ipal Place of	Business:		
37020 MILL EUSTIS, FL	. STREAM CT _ 32736		37020 MILI EUSTIS, F	STREAM C' L 32736 L	T IS		
Current Ma	ailing Address:		New Maili	ng Address:			
37020 MILL EUSTIS, FL	. STREAM CT _ 32736		37020 MILI EUSTIS, F	STREAM C' L 32736 L	T IS		
	e with s. 607.193(2)(b), F.S., the corporation did not r	•	e.	Certificate of Status Desired (X)	
Name and	Address of Cur	rent Registered Agent:	Name and	Address of	New Registered Agent:		
BREHM, LAURA A 37020 MILL STREAM COURT EUSTIS, FL 32736 US			37020 MILL	KIRCHNER, LAURA A 37020 MILL STREAM COURT EUSTIS, FL 32736 US			
The above in the State		omits this statement for the pur	pose of changing i	ts registered	office or registered agent, or	both,	
SIGNATURE: LAURA A KIRCHNER				09/06/2006			
	Electronic	Signature of Registered Agent			Date		
OFFICERS	AND DIRECTO	PRS:	ADDITION	S/CHANGES	TO OFFICERS AND DIRE	CTORS:	
Title: Name: Address: City-St-Zip:	D/P () De BREHM, LAURA 37020 MILL STRE EUSTIS, FL 32736	AM CT	Title: Name: Address: City-St-Zip:	D/P (X KIRCHNER, LA 37020 MILL S' EUSTIS, FL 3	TREAM CT		
Title: Name: Address: City-St-Zip:	D () De PASCARELLA, VIN 4628 NORTH U.S. WILDWOOD, FL	ICENT HIGHWAY 301	Title: Name: Address: City-St-Zip:	D (X) ROSSELLI, AF 38032 BROOM EUSTIS, FL 3	SIDE DRIVE		
			City-St-Zip.				

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 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: LAURA A KIRCHNER D/P 09/06/2006

() Delete

ROSSELLI, ARLENE

EUSTIS, FL 32736

38032 BROOKSIDE DRIVE

() Change () Addition