

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008180

FILED  
Mar 11, 2009  
Secretary of State

Entity Name: MIAMI VICE POLO CLUB, INC.

## Current Principal Place of Business:

8375 SW 58 AVENUE  
MIAMI, FL 33143

## New Principal Place of Business:

## Current Mailing Address:

8375 SW 58 AVENUE  
MIAMI, FL 33143

## New Mailing Address:

FEI Number: 26-3363186

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRIEDLAND, DAVID K  
355 ALHAMBRA CIRCLE  
SUITE 1100  
CORAL GABLES, FL 33134 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: FRIEDLAND, JULIE A  
Address: 8375 SW 58 AVENUE  
City-St-Zip: MIAMI, FL 33143 US

Title: D ( ) Delete  
Name: BUCELO, ARMANDO  
Address: 1401 PONCE DE LEON BLVD, STE 401  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: D ( ) Delete  
Name: NEALON, MARJIE  
Address: 12500 SW 68TH COURT  
City-St-Zip: MIAMI, FL 33156 US

Title: D ( ) Delete  
Name: ALONSO, CARLOS  
Address: 4160 EL PRADO BLVD  
City-St-Zip: MIAMI, FL 33133 US

Title: D ( ) Delete  
Name: SABO, NORMA E  
Address: 1401 BRICKELL AVENUE, SUITE 1500  
City-St-Zip: MIAMI, FL 33131 US

Title: D (X) Delete  
Name: REITZ, CHRISTOPHER  
Address: 9243 SW 215 TERRACE  
City-St-Zip: MIAMI, FL 33189 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: DAVID K FRIEDLAND

RA

03/11/2009

Electronic Signature of Signing Officer or Director

Date