

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2003 8:00 am
Secretary of State

07-18-2003 90076 023 ****61.25

DOCUMENT # N14498

1. Entity Name

POLO ISLAND HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

**1277 SW FOREST HILL
STE 1201
WELLINGTON FL 33414
US**

Mailing Address

**1277 SW FOREST HILL
STE 1201
WELLINGTON FL 33414
US**

2. Principal Place of Business

12773 W Forest Hill

Suite, Apt. #, etc.

3. Mailing Address

12773 W. Forest Hill

Suite, Apt. #, etc.

City & State

Zip

Country

City & State

Zip

Country

4. FEI Number **59-2697887**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**HARRIS, JOHN
12773 W FOREST HILL STE 1201
WEST PALM BEACH FL 33414**

7. Name and Address of New Registered Agent

Name

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

City

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	BUSHEY ROBERT	
STREET ADDRESS	2874 POLO ISLAND DR.	
CITY-ST-ZIP	W PALM BEACH FL	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	MANIATTY, CONNIE	
STREET ADDRESS	2905 POLO ISLAND DR	
CITY-ST-ZIP	W. PALM BEACH FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	AVERSANO, JANE	
STREET ADDRESS	2864 POLO ISLAND DRIVE	
CITY-ST-ZIP	WELLINGTON FL 33414	
TITLE	AT	<input type="checkbox"/> Delete
NAME	HARRIS, JOHN	
STREET ADDRESS	12773 W FOREST HILL STE 1201	
CITY-ST-ZIP	WELLINGTON FL 33414	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **John Harris**

7-16-03

561-790-2092

CR2E037 (4/03)