

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 15, 2008
Secretary of State**

DOCUMENT# N31005

Entity Name: ROYAL HIDDEN COVE AT THE POLO CLUB HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O TREX MANAGEMENT
1447 SW 13TH DRIVE
BOCA RATON, FL 33486 US

New Principal Place of Business:

C/O GLORIA O. NORTH, P.A.
400 S. DIXIE HIGHWAY, #323
BOCA RATON, FL 33432 US

Current Mailing Address:

C/O TREX MANAGEMENT
PO BOX 6286
BOCA RATON, FL 33427 US

New Mailing Address:

FEI Number: 65-0266262 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORTH, GLORIA O.
5301 NORTH FEDERAL HWY.
#380
BOCA RATON, FL 33437 US

Name and Address of New Registered Agent:

NORTH, GLORIA O.
400 SOUTH DIXIE HIGHWAY
#323
BOCA RATON, FL 33432 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: _____ Date: 04/15/2008
Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MEYERS, JOY
Address: 16690 SENTERRA DRIVE
City-St-Zip: DELRAY BEACH, FL 33484

Title: DST () Delete
Name: MILLMAN, ARTHUR
Address: 16680 SENTERRA DRIVE
City-St-Zip: DELRAY BEACH, FL 33484

Title: D () Delete
Name: SEGAL, DONNA
Address: 16580 SENTERRA DR
City-St-Zip: DELRAY BEACH, FL 33484

Title: D () Delete
Name: DIMSON, NORMAN
Address: 16659 SENTERRA DRIVE
City-St-Zip: DELRAY BEACH, FL 33484

Title: DVP () Delete
Name: FIDEL, NEIL
Address: 16539 SENTERRA DRIVE
City-St-Zip: DELRAY BEACH, FL 33484

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:

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: JOY MEYERS P Date: 04/15/2008
Electronic Signature of Signing Officer or Director