

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31607

FILED
Apr 15, 2008
Secretary of State

Entity Name: WEDGWOOD OF THE POLO CLUB HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O TRIAX GROVA SOUTH FLORIDA
4722 NW 2ND AVENUE, #C-110
BOCA RATON, FL 33431 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:

PO BOX 6286
BOCA RATON, FL 33427

New Mailing Address:

FEI Number: 65-0135767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORTH, GLORIA O
2300 GLADES ROAD
#203-E
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

NORTH, GLORIA O
400 S. 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:

04/15/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NADBOY, BETSY
Address: 16885 CHARTLEY COURT
City-St-Zip: DELRAY BEACH, FL 33484

Title: D () Delete
Name: MORSE, ELAINE
Address: 16805 CHARTLEY COURT
City-St-Zip: DELRAY BEACH, FL 33484

Title: D () Delete
Name: GOULD, LARRY DR
Address: 16821 COLCHESTER COURT
City-St-Zip: DELRAY BEACH, FL 33484

Title: D () Delete
Name: COIEN, LOIS
Address: 16800 COLCHESTER COURT
City-St-Zip: DELRAY BEACH, FL 33484

Title: D () Delete
Name: LINSKY, MURIEL
Address: 16890 COLCHESTER COURT
City-St-Zip: DELRAY BEACH, FL 33484

Title: D () Delete
Name: WOLBE, PATTY
Address: 16810 COLCHESTER COURT
City-St-Zip: DELRAY BEACH, FL 33404

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
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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: BETSY NADBOY

D

04/15/2008

Electronic Signature of Signing Officer or Director

Date