## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N47925

Entity Name: POLO CLUB OF LEE COUNTY, INC.

FILED Sep 01, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

8961 CONFERENCE DRIVE FORT MYERS, FL 33919

Current Mailing Address: New Mailing Address:

P.O. BOX 1661 FORT MYERS, FL 339021661

FEI Number: 65-0406452 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JOHN E STAMPS, CPA

9541-5 CYPRESS LAKE DRIVE
FORT MYERS, FL 33919 US

CHOUINARD, JAMES A CPA
9541 CYPRESS LAKE DRIVE SUITE 5
FORT MYERS, FL 33919 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: JAMES A. CHOUINARD 09/01/2004

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: LISSACK, KRISTIN Name: KEMMER, CECILIA Address: 1429 WINKLER AVANUE Address: 9031 HARVEST WOOD CT.

 Address:
 1429 WINKLER AVANUE
 Address:
 9031 HARVEST WOOD CT.

 City-St-Zip:
 FORT MYERS, FL 33901
 City-St-Zip:
 ESTERO, FL 33928

Title: VD ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 CHOVINARD, JIM
 Name:
 DELIZIA, CAROLYN

 Address:
 4717 SW 13TH AVE #208
 Address:
 1510 OLMEDA WAY

 City-St-Zip:
 CAPE CORAL, FL 33914
 City-St-Zip:
 FORT MYERS, FL 33901

Title: TD () Delete Title: TD (X) Change () Addition
Name: LISSACK, JON G Name: WILLIAMS, PATRICIA

Address: 1429 WINKLER AVENUE Address: 1421 PASSAIC AVENUE
City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: FORT MYERS, FL 33901

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 BRIGHT, REBECA
 Name:
 WERNER, SHERRY

 Address:
 226 NW 3RD PLACE
 Address:
 1510 LAKELAND CIRCLE

 City-St-Zip:
 CAPE CORAL, FL 33993
 City-St-Zip:
 FORT MYERS, FL 33913

Title: D () Delete Title: D (X) Change () Addition

 Name:
 CROTEAN, BARRY
 Name:
 MOULTON, ALLISON

 Address:
 310 SE 22ND ST
 Address:
 1123 SW 23RD STREET

 City-St-Zip:
 CAPE CORAL, FL 33990
 City-St-Zip:
 CAPE CORAL, FL 33991

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name: DELIZIA, CAROLYN Name: KUNDTZ, CASÉY

Address: 1510 OLMEDA WAY Address: 1165 LAKE MCGREAGOR DR. City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: FORT MYERS, FL 33919

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PATRICIA WILLIAMS T 09/01/2004