2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N95000000253

Apr 17, 2009 Secretary of State

Entity Name: POLO TRACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

13481 POLO TRACE DR. DELRAY BEACH, FL 33446

Current Mailing Address: New Mailing Address:

13481 POLO TRACE DR. DELRAY BEACH, FL 33446

FEI Number: 65-0616362 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:

DICKER, EDWARD LOUIS CAPLAN, ESQ. OF

DICKER, KRIVOK & STOL, P.A. ASSOCIATED CORPORATE SERVICES, LLC

1818 AUSTRALIAN AVE. 6111 BROKEN SOUND PARKWAY NW, SUITE 200

WEST PALM BEACH, FL 33409 US BOCA RATON, FL 33487 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: LOUIS CAPLAN, ESQUIRE 04/17/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition Name: BERMACK, ROBERT Name:

 Address:
 7837 MONARCH COURT
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33446
 City-St-Zip:

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

 Name:
 WARTEL, SIDNEY
 Name:

 Address:
 13562 KILTIE COURT
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33446
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 GRAY, RICHARD
 Name:

 Address:
 7632 CHARRING CROSS LANE
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33446
 City-St-Zip:

 $\label{eq:times} {\sf Title:} \qquad {\sf S} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

 Name:
 RAISON, DON
 Name:
 MICHAEL, CÖHEN

 Address:
 7910 MONARCH COURT
 Address:
 7927 MONARCH COURT

 City-St-Zip:
 DELRAY BEACH, FL 33446
 City-St-Zip:
 DELRAY BEACH, FL 33446

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

 Name:
 WEISMAN, MARIANNE
 Name:

 Address:
 13646 K LTIE CT.
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33446
 City-St-Zip:

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

 Name:
 COHEN, MICHAEL
 Name:
 ROBERT, CUSKADEN

 Address:
 3027 MONARCH CT
 Address:
 7843 MONARCH CT

 City-St-Zip:
 DELRAY BEACH, FL 3346
 City-St-Zip:
 DELRAY BEACH, FL 3346

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: MICHAEL COHEN S 04/17/2009