## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000001496

Jul 02, 2007 Secretary of State

FILED

Entity Name: POLO PARK EAST RO ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 525 POLO PARK EAST BLVD DAVENPORT, FL 33897 **Current Mailing Address: New Mailing Address:** 525 POLO PARK EAST BLVD DAVENPORT, FL 33897 US FEI Number: 59-3372280 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NESTEL, WILLIAM POLO PÁRK EAST RD 525 POLO PARK EAST RO INC DAVENPORT, FL 33897 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete () Change () Addition NESTEL, WILLIAM Name: Name: 125 DARLENE CT Address: Address: City-St-Zip: DAVENPORT, FL 33897 City-St-Zip: Title: () Delete Title: () Change () Addition SHEA, PATRICIA Name: Name: Address: 747 POLO PK E BLVD Address: City-St-Zip: DAVENPORT, FL 33897 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition GRIFFITH, TED GRIFFITH, EDWARD Name: Name: Address: 333 SUF AVE Address: 333 SUE AVE City-St-Zip: DAVENPORT, FL 33897 City-St-Zip: DAVENPORT, FL 33897 Title: Title: () Change () Addition ( ) Delete Name: WELLENS, KENNETH G Name: Address: 128 DREAMA DRIVE Address: City-St-Zip: DAVENPORT, FL 33897 City-St-Zip: Title: () Delete Title: () Change () Addition HAWKINS, HAROLD Name: Name: 301 SUE AVE Address: Address: City-St-Zip: DAVENPORT, FL 33897 City-St-Zip: Title: () Delete Title: () Change () Addition DERBYSHIRE, FRANK Name: Name: Address: 610 POLO PARK EAST BLVD Address: DAVENPORT, FL 33897 City-St-Zip: 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: WILLIAM NESTEL PRES 07/02/2007