2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# P02000126005

Entity Name: HP FLORIDA/POLOS, INC.

Current Principal Place of Business:

191 NORTH WACKER DR
#2500
CHICAGO, IL 60606 US

New Principal Place of Business:

191 NORTH WACKER DRIVE
SUITE 2500
CHICAGO, IL 60606 US

Current Mailing Address:

C/O GAIL CAREY
191 N.WACKER DRIVE #2500
CHICAGO, IL 60606

New Mailing Address:

191 NORTH WACKER DRIVE
SUITE 2500
CHICAGO, IL 60606

FEI Number: 13-4225297 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: TOGNARELLI, MAURY R
Address: 191 N.WACKER DRIVE,SUITE 2500
City-St-Zip: CHICAGO, IL 60606

Title: DV ( ) Delete
Name: EDELMAN, HOWARD J
Address: 191 N. WACKER DRIVE,SUITE 2500
City-St-Zip: CHICAGO, IL 60606

Title: D ( ) Delete
Name: MCCARTHY, THOMAS
Address: 191 N. WACKER DRIVE,SUITE 2500
City-St-Zip: CHICAGO, IL 60606

Title: VS ( ) Delete
Name: KURNICK, KAREN
Address: 191 N. WACKER DRIVE,SUITE 2500
City-St-Zip: CHICAGO, IL 60606

Title: T ( ) Delete
Name: RYAN, COLLEEN
Address: 191 N. WACKER DRIVE,SUITE 2500
City-St-Zip: CHICAGO, IL 60606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: MCCARTHY, THOMAS D
Address: 191 N. WACKER DRIVE,SUITE 2500
City-St-Zip: CHICAGO, IL 60606

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HOWARD J. EDELMAN DV 04/24/2007

Electronic Signature of Signing Officer or Director Date