2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000000420

Address:

City-St-Zip:

9775 OLD PATINA WAY

ORLANDO, FL 32832 US

Entity Name: POLK PROPERTY GROUP, INC.

FILED Feb 22, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
826 SPRIN WINTER H	NG LAKE SQUAI HAVEN, 33881		826 SPRING LAKE SQ WINTER HAVEN, FL		
Current Mailing Address:			New Mailing Address	New Mailing Address:	
826 SPRIN WINTER H	NG LAKE SQUAI HAVEN, 33881		826 SPRING LAKE SQ WINTER HAVEN, FL		
FEI Number	: 16-1745761	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of Cu	rrent Registered Agent:	Name and Address of	f New Registered Agent:	
2638 E BA	G, ROBERT R Y ISLE DRIVE RSBURG, FL 33	3705 US			
The above in the State	named entity su e of Florida.	ıbmits this statement for the ρ	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
	Electronic	Signature of Registered Age	ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ()E HELMLING, ROB 2638 E BAY ISLE ST. PETERSBUR	DRIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () E HELMLING, MAR 2338 S SHORE E ST. PETERSBUR	RIVE SE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () E HELMLING, MAT 4205 THAYER AL ORLANDO, FL 3	LEY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VP () E REYNOLDS. MAT	Delete THEW	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: MARK HELMLING VP 02/22/2007