

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S68124 (4)

1. Corporation Name

SARASOTA POLO CLUB, INC.



Principal Place of Business

**7550 LORRAINE RD.
BRADENTON FL 34202**

Mailing Address

**7550 LORRAINE RD.
BRADENTON FL 34202**

3. Date Incorporated or Qualified
07/17/1991

3a. Date of Last Report
03/14/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number
65-0289518

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**CHIOFALO, ANTHONY J.
7550 LORRAINE RD
BRADENTON FL 34202**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and block if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **P**
CLARKE, JOHN C.
STREET ADDRESS **7550 LORRAINE ROAD**
CITY- ST- ZIP **BRADENTON FL**

TITLE ☐ DELETE

NAME **VP**
MORRIS, CLIVE
STREET ADDRESS **7550 LORRAINE ROAD**
CITY- ST- ZIP **BRADENTON FL**

TITLE ☐ DELETE

NAME **D**
CARROLL, MARY FRAN
STREET ADDRESS **7550 LORRAINE ROAD**
CITY- ST- ZIP **BRADENTON FL**

TITLE ☒ DELETE

NAME **ST**
CHIOFALO, ANTHONY J.
STREET ADDRESS **7550 LORRAINE RD**
CITY- ST- ZIP **BRADENTON FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an affidavit.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/96

Date

Daytime Phone

CR2E034 (12/95)