

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 06, 2007 8:00 am**  
**Secretary of State**

03-06-2007 90001 046 \*\*\*158.75

**DOCUMENT # V11409**

1. Entity Name

POLO RANCHES OF SARASOTA, INC.



Principal Place of Business  
14400 COVENANT WAY  
BRADENTON, FL 34202

Mailing Address  
14400 COVENANT WAY  
BRADENTON, FL 34202

**40029827**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01292007

Chg-P

CR2E034 (12/06)

4. FEI Number

65-0329191

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CHIOFALO, ANTHONY J  
14400 COVENANT WAY  
BRADENTON, FL 34202

Name

Street Address (P O Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	V	<input type="checkbox"/> Delete
NAME	PERKA, DAN	
STREET ADDRESS	14400 COVENANT WAY	
CITY-ST-ZIP	BRADENTON, FL 34202	
TITLE	V	<input type="checkbox"/> Delete
NAME	POKRYWA, TODD	
STREET ADDRESS	14400 COVENANT WAY	
CITY-ST-ZIP	BRADENTON, FL 34202	
TITLE	ST	<input type="checkbox"/> Delete
NAME	CHIOFALO, ANTHONY J	
STREET ADDRESS	14400 COVENANT WAY	
CITY-ST-ZIP	BRADENTON, FL 34202	
TITLE	D	<input type="checkbox"/> Delete
NAME	UIHLEIN, ROBIN	
STREET ADDRESS	14400 COVENANT WAY	
CITY-ST-ZIP	BRADENTON, FL 34202	
TITLE	P	<input type="checkbox"/> Delete
NAME	JENSEN, REX	
STREET ADDRESS	14400 COVENANT WAY	
CITY-ST-ZIP	BRADENTON, FL 34202	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VICE PRESIDENT, SECRETARY, TREASURER	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Anthony J. Chiofalo* **ANTHONY J. CHIOFALO** 2.1.07 941-757-1626

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #