

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000081585

FILED
Apr 03, 2009
Secretary of State

Entity Name: CLUB PORTOFINO SPRINGS, LLC

Current Principal Place of Business:

4651 SHERIDAN STREET
480
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

4651 SHERIDAN STREET
480
HOLLYWOOD, FL 33021

New Mailing Address:

C/O PRIME MANAGEMENT GROUP
4651 SHERIDAN STREET, SUITE 480
HOLLYWOOD, FL 33021

FEI Number: 20-5478381

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENFIELD, STEVEN B
7000 WEST PALMETTO PARK RD.
402
BOCA RATON, FL 33433 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ABBO, FREDDY
Address: 4651 SHERIDAN STREET SUITE 480
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGRM () Delete
Name: ABBO, LARRY
Address: 4651 SHERIDAN STREET SUITE 480
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGR () Delete
Name: ABBO, EVA
Address: 4651 SHERIDAN STREET SUITE 480
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES:

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

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LARRY ABBO

MGRM

04/03/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date