

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006284

FILED
Jan 20, 2009
Secretary of State

Entity Name: MURANO AT PORTOFINO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1000 S. POINTE DR
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1000 S. POINTE DR
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 65-1135925 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROGEL, DAVID
121 ALHAMBRA PLAZA
SUITE 1000
CORAL GABLES, FL 33134 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MANDY, STEVEN
Address: 1000 S. POINTE DR #1404
City-St-Zip: MIAMI BEACH, FL 33139

Title: V () Delete
Name: FIORE, ROBERT J
Address: 1000 S. POINTE DR #2003
City-St-Zip: MIAMI BEACH, FL 33139

Title: T () Delete
Name: LACHLER, ULRICH
Address: 1000 S. POINTE DR #2902
City-St-Zip: MIAMI BEACH, FL 33139

Title: S () Delete
Name: GEVAS, STEVE
Address: 1000 S. POINTE DRIVE #1001
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: VASILIOU, BASIL
Address: 1000 S POINTE DR
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: PERLMUTTER, MICHAEL
Address: 1000 S. POINTE DRIVE #3701
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MANDY, STEPHEN
Address: 1000 S. POINTE DR #1404
City-St-Zip: MIAMI BEACH, FL 33139

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

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

Title: S (X) Change () Addition
Name: PERLMUTTER, MICHAEL
Address: 1000 S. POINTE DRIVE #3701
City-St-Zip: MIAMI BEACH, FL 33139

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

Title: D (X) Change () Addition
Name: GEVAS, STEVEN
Address: 1000 S. POINTE DRIVE #1001
City-St-Zip: MIAMI BEACH, FL 33139

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

SIGNATURE: DR. STEPHEN MANDY

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date