

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08269

FILED  
Mar 24, 2009  
Secretary of State

**Entity Name:** THE PORTICOS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O ALLIED PROPERTY GROUP, INC  
12350 SW 132 CT STE 114  
MIAMI, FL 33186 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ALLIED PROPERTY GROUP, INC  
12350 SW 132 CT STE 114  
MIAMI, FL 33186 US

**New Mailing Address:**

**FEI Number:** 65-0433845

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EISINGER, DENNIS J  
4000 HOLLYWOOD BLVD.  
265 SOUTH  
HOLLYWOOD, FL 33021 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: PD ( ) Delete  
Name: RODRIGUEZ, OSVALDO  
Address: 15439 SW 80 ST. #105  
City-St-Zip: MIAMI, FL 33193

Title: VP&S ( ) Delete  
Name: APARICIO, LUIS  
Address: 14829 SW 80 ST. # 104  
City-St-Zip: MIAMI, FL 33193

Title: TD ( ) Delete  
Name: BERDOTE, RAFAELA I  
Address: 14833 SW 80 ST APT #103  
City-St-Zip: MIAMI, FL 33193

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VPD (X) Change ( ) Addition  
Name: APARICIO, LUIS  
Address: 14829 SW 80 ST. # 104  
City-St-Zip: MIAMI, FL 33193

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

Title: SD ( ) Change (X) Addition  
Name: APARICIO, LUIS  
Address: 14829 SW 80 ST. # 104  
City-St-Zip: MIAMI, FL 33193

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: OSVALDO RODRIGUEZ

PD

03/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date