2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768721

Entity Name: VILLA PORTOFINO HOMEOWNERS ASSOCIATION, INC.

FILED
Mar 10, 2025
Secretary of State
9061553137CC

Current Principal Place of Business:

C/O REALMANAGE

11784 WEST SAMPLE ROAD SUITE 103

CORAL SPRINGS, FL 33065

Current Mailing Address:

C/O REALMANAGE PO BOX 803555

DALLAS, TX 75380 US

FEI Number: 30-1005961 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TUCKER & LOKEINSKY, P.A. 800 E. BROWARD BLVD.

SUITE 710

FT. LAUDERDALE, FL 33301 US

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: JESSICA LOKEINSKY 03/10/2025

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title SECRETARY Title DIRECTOR

Name SEGERS, DENISE Name VOYER, DIANA

Address C/O REALMANAGE Address C/O REALMANAGE

11784 WEST SAMPLE ROAD SUITE 11784 WEST SAMPLE ROAD SUITE

City-State-Zip: CORAL SPRINGS FL 33065 City-State-Zip: CORAL SPRINGS FL 33065

Title VP Title PRESIDENT

Name DEPETRO, JOHN Name VULPIS, SAMUEL

Address C/O REALMANAGE Address C/O REALMANAGE

11784 WEST SAMPLE ROAD SUITE 11784 WEST SAMPLE ROAD SUITE

City-State-Zip: CORAL SPRINGS FL 33065 City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR Title DIRECTOR

Name PUENTE, RAUL JR. Name VILAR, CYNTHIA RODRIGUES

Address C/O REALMANAGE Address C/O REALMANAGE

11784 WEST SAMPLE ROAD SUITE 11784 WEST SAMPLE ROAD SUITE

City-State-Zip: CORAL SPRINGS FL 33065 City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR

Address

Name MOULIN, LUCIANA

11784 WEST SAMPLE ROAD SUITE

103

City-State-Zip: CORAL SPRINGS FL 33065

C/O REALMANAGE

I hereby 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 all other like empowered.

SIGNATURE: SAMUEL VULPIS PRESIDENT 03/10/2025