## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000331

Entity Name: PORTOFINO VILLAGE HOMEOWNERS ASSOCIATION, INC.

FILED Apr 03, 2014 Secretary of State CC2040545346

## **Current Principal Place of Business:**

2945 W. CYPRESS CREEK RD.

SUITE 201

FT. LAUDERDALE, FL 33309

## **Current Mailing Address:**

C/O EXCLUSIVE PROPERTY MANAGEMENT 2945 W. CYPRESS CREEK RD. SUITE 201 FT. LAUDERDALE, FL 33309 US

FEI Number: 65-0977954 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ALLIANCE C.A.S. 1000 EAST HALLANDALE BEACH BLVD. HALLANDALE BEACH, FL 33009 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: STEVE CABALLERO 04/03/2014

Electronic Signature of Registered Agent

Officer/Director Detail:

Title VP, DIRECTOR Title PD

Name BENITEZ, KAREN Name BRUCKENSTEIN, JOEL

Address 2945 W. CYPRESS CREEK RD. Address 2945 W. CYPRESS CREEK RD.

SUITE 201 SUITE 201

City-State-Zip: FT. LAUDERDALE FL 33309 City-State-Zip: FT. LAUDERDALE FL 33309

Title SECRETARY, DIRECTOR Title TREASURER, DIRECTOR

Name PERNICIARO, KEITH Name GARVIN, ASA

Address 2945 W. CYPRESS CREEK RD. Address 2945 W. CYPRESS CREEK RD.

SUITE 201 SUITE 201

City-State-Zip: FT. LAUDERDALE FL 33309 City-State-Zip: FT. LAUDERDALE FL 33309

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.

Electronic Signature of Signing Officer/Director Detail

Date