## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 727712** 

FILED Mar 17, 2011 Secretary of State

**New Principal Place of Business:** 

Entity Name: PORTO FINO GARDENS ASSOCIATION, INC.

Current Principal Place of Business:

6413 CONGRESS AVENUE, SUITE 200 1100 S.E. 4 AVENUE

BOCA RATON, FL 33487 US DEERFIELD BEACH, FL 33441 US

Current Mailing Address: New Mailing Address:

6413 CONGRESS AVENUE, SUITE 200 1100 S.E. 4 AVENUE

BOCA RATON, FL 33487 US DEERFIELD BEACH, FL 33441 BR

FEI Number: 59-1578920 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BUDD, GARY

CREST MANAGEMENT GROUP, INC.
6413 CONGRTESS AVENUE, SUITE 200

CARLSON, DOLORES D
1100 S.E. 4 AVENUE
#14

BOCA RATON, FL 33487 US DEERFIELD BEACH, FL 33441 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: DOLORES D. CARLSON 03/17/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PRES

Name: BOST, BELLE

Address: 1100 SE 4TH AVE #26

City-St-Zip: DEERFIELD BEACH, FL 33441 BR

Title: VP

Name: MAST, SUSAN

Address: 1100 SE 4TH AVE. #31

City-St-Zip: DEERFIELD BEACH, FL 33441 BR

Title: SEC

Name: PENNELL, DAVID Address: 1100 SE 4TH AVE #28

City-St-Zip: DEERFIELD BEACH, FL 33441 BR

Title: TREA

Name: MILLER, PATRICIA Address: 1100 S.E 4 AVENUE, #4

City-St-Zip: DEERFIELD, BEACH, FL 33441 BR

Title: DIR

Name: CARLSON, DOLORES D Address: 1100 S.E. 4 AVE., #14

City-St-Zip: DEERFIELD BEACH, FL 33441 BR

Title: ALT

Name: BEZERRA, JANAINNA L Address: 1100 S.E. 4 AVE., #36

City-St-Zip: DEERFIELD BEACH, FL 33441 FL

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: I. BELLE BOST PRES 03/17/2011