

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morton  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

MAY - 1 AM 8:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **728938** (2)

1. Corporation Name

**PORTOBELLO OWNERS ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

2828 PROCTOR ROAD  
% MILLER MANAGEMENT SERVICES  
SARASOTA FL 34231  
US

2828 PROCTOR RD.  
% MILLER MANAGEMENT SERVICES  
SARASOTA FL 34231  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/26/1974

3a. Date of Last Report

02/28/1994

4. FEI Number

59-1885871

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status

\$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes

Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILLER MANAGEMENT SERVICES  
2828 PROCTOR ROAD  
SARASOTA FL 34231

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (Typed or printed name of registered agent and fee if applicable)

NOTE: Registered Agent Signature required when registering

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE SD  
NAME BOPP, PATRICIA  
STREET ADDRESS 3240 GULF OF MEX DR B607  
CITY ST ZIP LONGBOAT KEY, FL 00000

11 TITLE  Change  Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY ST ZIP

TITLE D  
NAME ~~HARNES, ROBERT~~  
STREET ADDRESS 3240 GULF OF MEXICO DR, #B407--  
CITY ST ZIP LONGBOAT KEY, FL 00000

21 TITLE  Change  Addition  
22 NAME HENNICKE, Eugene  
23 STREET ADDRESS 3240 Gulf of Mexico Drive, #B304  
24 CITY ST ZIP

TITLE VPD  
NAME ~~MCGUIGAN, ROBERT--~~  
STREET ADDRESS 3240 GULF OF MEXICO DR, #B603--  
CITY ST ZIP LONGBOAT KEY FL

31 TITLE  Change  Addition  
32 NAME YOHE, Richard  
33 STREET ADDRESS 3235 Gulf of Mexico Drive, #A305  
34 CITY ST ZIP

TITLE TD  
NAME FERST, ROBERT  
STREET ADDRESS 3240 GULF OF MEX DR B405  
CITY ST ZIP LONGBOAT KEY, FL 00000

41 TITLE  Change  Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY ST ZIP

TITLE DP  
NAME ~~HENNICKE, EUGENE--~~  
STREET ADDRESS 3240 GULF OF MEX DR B304--  
CITY ST ZIP LONGBOAT KEY, FL 00000

51 TITLE  Change  Addition  
52 NAME REHL, Fran  
53 STREET ADDRESS 3240 Gulf of Mexico Drive, #B204  
54 CITY ST ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP

61 TITLE  Change  Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(1)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on its attachment with an address.

SIGNATURE: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/04/90  
Date

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