

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728938

FILED  
Feb 01, 2010  
Secretary of State

**Entity Name:** PORTOBELLO OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

3235 AND 3240 GULF OF MEXICO DRIVE  
LONGBOAT KEY, FL 34228 US

**New Principal Place of Business:**

**Current Mailing Address:**

595 BAY ISLES ROAD  
SUITE 200  
LONGBOAT KEY, FL 34228 US

**New Mailing Address:**

BETH CALLANS MANAGEMENT CORPORATION  
595 BAY ISLES RD STE 200  
LONGBOAT KEY, FL 34228 US

**FEI Number:** 59-1885871

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BETH CALLANS MANAGEMENT CORPORATION  
595 BAY ISLES RD STE 200  
LONGBOAT KEY, FL 34228 US

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

BETH CALLANS MANAGEMENT CORPORATION  
595 BAY ISLES RD  
STE 200  
LONGBOAT KEY, FL 34228 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: BETH CALLANS MANAGEMENT CORPORATION

02/01/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GILBERT, DEBRA  
Address: 3295 GULF OF MEXICO DR A501  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: DST  
Name: STERNBERG, ROLF  
Address: 3240 GULF OF MEXICO DR. #B505  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: D  
Name: COLLINS, WILLIAM  
Address: 3240 GULF OF MEXICO DR B105  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: VP  
Name: MILLER, SUZANNE  
Address: 3235 GULF OF MEXICO DR A403  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: D  
Name: HILL, DAVID  
Address: 3240 GULF OF MEXICO DR. #B307  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: AT  
Name: CALLANS, BETH  
Address: 595 BAY ISLES RD SUITE 200  
City-St-Zip: LONGBOAT KEY, FL 34228

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: DEBRA GILBERT

PD

02/01/2010

Electronic Signature of Signing Officer or Director

Date