

FILE NOW: FILING FEE IS \$61.25

FILED

May 19 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 747689 (8)

1. Corporation Name

PORTOFINO VILLAGE I "A" CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

1310 AVENUE OF THE STARS  
COCONUT CREEK FL 33066  
US

Mailing Address

1310 AVENUE OF THE STARS  
COCONUT CREEK FL 33066-1485  
US

3. Date Incorporated or Qualified  
06/15/1979

3a. Date of Last Report  
03/22/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number  
59-1906207

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

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

Yes No

9. Name and Address of Current Registered Agent

RAVO, PAT T.  
1310 AVENUE OF THE STARS  
% WYNMOOR COMMUNITY COUNCIL, INC.  
COCONUT CREEK FL 33066

10. Name and Address of New Registered Agent

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DT MAHLER, ARTHUR  
NAME  
STREET ADDRESS 3002 D-3 PORTOFINO ISLE  
CITY-ST-ZIP COCONUT CREEK FL

TITLE DV TOLEN, NAT  
NAME  
STREET ADDRESS 3002 G-2 PORTOFINO ISLE  
CITY-ST-ZIP COCONUT CREEK FL

TITLE D SLOSBERG, SAM  
NAME  
STREET ADDRESS 3002 A2 PORTOFINO ISLE  
CITY-ST-ZIP COCONUT CREEK FL

TITLE DP RODIS, HENRY  
NAME  
STREET ADDRESS 3002 J2 PORTOFINO ISLE  
CITY-ST-ZIP COCONUT CREEK FL

TITLE SD SCHUMACHER, JEANETTE  
NAME  
STREET ADDRESS 3002 H-2 PORTOFINO ISLE  
CITY-ST-ZIP COCONUT CREEK FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

SD Elaine Goldenbach  
3002 Portofino Isle, Apt. F-1  
Coconut Creek, FL 33066

D Jack Feinstein  
3002 Portofino Isle, Apt. C-4  
Coconut Creek, FL 33066

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 an attachment with an address.

SIGNATURE: Henry Rodis

2/11/97 (954) 978-2600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0026517

CR2E037 (9/96)