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Jan 21 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 # **749201** (0)

1. Corporation Name

PORTOFINO-ON-THE-INTRACOASTAL CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
77 SOUTH BIRCH ROAD FT LAUDERDALE FL 33316	77 SOUTH BIRCH ROAD FT LAUDERDALE FL 33316-1500

3. Date Incorporated or Qualified: 10/04/1979
3a. Date of Last Report: 01/30/1996

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 59-2346809 ☐ 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

BIGGAN, JOHN
77 SOUTH BIRCH RD
FT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name: Alysan Childs
82 Street Address (P.O. Box Number is Not Acceptable): 77 S. Birch Road
83 Ft. Lauderdale, Fl. 33316
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] 1-9-97
Signature of new or named registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE	PD	☐ Change ☒ Addition
NAME	BIGGAN, JOHN		1.2 NAME	Alysan Childs	
STREET ADDRESS	77 SOUTH BIRCH ROAD		1.3 STREET ADDRESS	77 S. Birch Road	
CITY-ST-ZIP	FT LAUDERDALE FL 33316		1.4 CITY-ST-ZIP	Ft. Lauderdale, Fl. 33316	
TITLE	VD	☒ DELETE	2.1 TITLE	VD	☐ Change ☒ Addition
NAME	FIGARI, GERARD		2.2 NAME	Peter Gatehouse	
STREET ADDRESS	77 SOUTH BIRCH ROAD		2.3 STREET ADDRESS	77 S. Birch Road	
CITY-ST-ZIP	FT. LAUDERDALE FL		2.4 CITY-ST-ZIP	Ft. Lauderdale, Fl. 33316	
TITLE	STD	☒ DELETE	3.1 TITLE	STD	☐ Change ☒ Addition
NAME	O'CONNELL, JOSEPH		3.2 NAME	Leo Blacke	
STREET ADDRESS	77 SOUTH BIRCH ROAD		3.3 STREET ADDRESS	77 S. Birch Road	
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4 CITY-ST-ZIP	Ft. Lauderdale, Fl. 33317	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

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: [signature] 1-9-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0036454