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NONPROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 01, 1999 8:00 am
Secretary of State
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DOCUMENT # 749201

1. Corporation Name

PORTOFINO-ON-THE-INTRACOASTAL CONDOMINIUM ASSOCI ATION, INC.

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

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 10/04/1979
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2346809 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip / Country 24 / 25	Zip / Country 29 / 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
GRAY, RICHARD J 77 S BIRCH RD 4B FT LAUDERDALE FL 33316	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	GRAY, RICHARD		1.2 NAME	
STREET ADDRESS	77 SOUTH BIRCH ROAD 4B		1.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33316		1.4 CITY-ST-ZIP	
TITLE	VD	☑ DELETE	2.1 TITLE	Vice President ☐ Change ☑ Addition
NAME	CHILDS, ALYSAN		2.2 NAME	Ernest Horlecker
STREET ADDRESS	77 SOUTH BIRCH ROAD 3A		2.3 STREET ADDRESS	77 South Birch Road
CITY-ST-ZIP	FT LAUDERDALE FL 33316		2.4 CITY-ST-ZIP	Fort Lauderdale, FL. 33316
TITLE	TD	☑ DELETE	3.1 TITLE	SEC./TREASURER ☐ Change ☑ Addition
NAME	MCCONVILLE, JIM		3.2 NAME	Neal Gilbert
STREET ADDRESS	77 SOUTH BIRCH ROAD 11B		3.3 STREET ADDRESS	77 South Birch Rd
CITY-ST-ZIP	FT. LAUDERDALE FL 33316		3.4 CITY-ST-ZIP	Fort Lauderdale, FL. 33316
TITLE		☐ DELETE	4.1 TITLE	Director ☐ Change ☑ Addition
NAME			4. 2 NAME	Theodore Mau
STREET ADDRESS			4.3 STREET ADDRESS	77 South Birch Road
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Fort Lauderdale FL. 33316
TITLE		☐ DELETE	5.1 TITLE	Director ☐ Change ☑ Addition
NAME			5.2 NAME	Gary Liddell
STREET ADDRESS			5.3 STREET ADDRESS	77 South Birch Rd
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Fort Lauderdale, FL. 33316
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 (11/98)

14. I 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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Richard J. Gray 2/3/99 954-765-5500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #