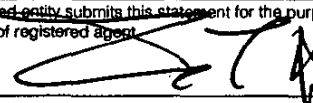
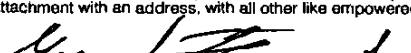


02-14-2005 90042 014 *****61.25

DOCUMENT # 749201			
1. Entity Name PORTOFINO-ON-THE-INTRACOASTAL CONDOMINIUM ASSOCIATION, INC.		02-14-2005 90042 014 ****61.25	
Principal Place of Business 77 SOUTH BIRCH ROAD FT LAUDERDALE, FL 33316		Mailing Address 77 SOUTH BIRCH ROAD FT LAUDERDALE, FL 33316	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent HALPERN, MARC A - 150 WEST FLAGLER ST STE 2701 MIAMI, FL 33130		7. Name and Address of New Registered Agent Name Michael L. Hyman Street Address (P.O. Box Number is Not Acceptable) 150 West Flagler Street Suite 2701 City Miami FL Zip Code 33130	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  (NOTE: Registered Agent signature required when reinstating) DATE 2/9/05			
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST FIGARI, GERARD 77 SOUTH BIRCH ROAD 5A FT LAUDERDALE, FL 33316 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHEERIN, PAUL 77 S BIRCH RD 7D FT. LAUDERDALE, FL 33316 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MAU, THEODORE 77 SOUTH BIRCH RD 12-D FT. LAUDERDALE, FL 33316 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WHEELER, JAMES 77 SOUTH BIRCH RD., MEZZ-A FT LAUDERLAKE, FL 33316 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GRAY, RICHARD 77 SOUTH BIRCH ROAD FT LAUDERDALE, FL 33316 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		2-3-2005 954/463-4742 Date Daytime Phone #	