2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753077

FILED May 09, 2007 Secretary of State

Entity Name: PORT LARGO CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place of Business:	
417 BAHIA KEY LARG	AVE O, FL 33037	US		
Current Mailing Address:			New Mailing Address:	
P O BOX 1: KEYLARGO	290), FL 33037	US		
FEI Number: 59-2342745 FEI Number Applied For () FEI Nu In accordance with s. 607.193(2)(b), F.S., the corporation did not receive Name and Address of Current Registered Agent:			=	Certificate of Status Desired ()
Name and	Address of Cu	irrent Registered Agent:	Name and Address of	of New Registered Agent:
FORBIES, 4230 SE 20 CAPE COR		US		
The above in the State		ubmits this statement for the purpose o	of changing its registere	d office or registered agent, or both,
SIGNATUR	E:			
	Electronic	Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	S ()E MIKLAS, SHELLE P.O. BOX 2012 ISLMORADA, FL		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SD () E FORBES, JERRY 4230 SE 20 PL 3 CAPE CORAL, FI	04	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	TD () E LORDI, RICHARI 120 INMAN AVE AVENEL, NJ 070		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () E RUTKOWSKI, RI 525 CARIBBEAN KEY LARGO, FL	DR.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D ()E TULLER, STANLI PO BOX 279 ESSEX, NY 129:		Title: Name: Address: City-St-Zip:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SHELLEY MIKLAS S 05/09/2007