

44-95 B-3004-XC
FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

APPROVED AND FILED

95 APR -4 AM 10:14

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995
 FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 768721 (3)
 1. Corporation Name
VILLA PORTOFINO HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business Mailing Address
 721 N.POWERLINE RD DEERFIELD BEACH FL 33442
 721 N.POWERLINE RD DEERFIELD BEACH FL 33442

DO NOT WRITE IN THIS SPACE
 3. Date incorporated or Qualified 06/01/1983
 3a. Date of Last Report 05/01/1994
 4. FEI Number 59-2501056
 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
 7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
 8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
 21 26 QUALITY MET
 Suite, Apt. #, etc. 27 1161 W HILLSBORO BLVD SUITE 326
 22 27
 City & State 28 DEERFIELD BEACH FLA
 23 28
 Zip 24 33442 Country 25 Country 29 BROWARD 30

9. Name and Address of Current Registered Agent
 MURPHY, DENNIS
 721 N POWERLINE RD
 DEERFIELD BEACH FL 33442

10. Name and Address of New Registered Agent
 81 Name FREDERICK O POKRAJAK QUALITY MET
 82 Street Address (P.O. Box Number is Not Acceptable) 1161 W HILLSBORO BLVD SUITE 326
 83
 84 City DEERFIELD BEACH FL 85 Zip Code 33442

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.
 SIGNATURE FREDERICK O POKRAJAK
 Signature, typed or printed name of registered agent and the 4 sections (NOTE: Registered Agent signature required when reinstating)
 DATE 4/3/95

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ZIMMERMAN, LINDA
STREET ADDRESS	743 N POWERLINE RD
CITY - ST - ZIP	DEERFIELD BEACH FL
TITLE	TD
NAME	MURPHY, DENNIS
STREET ADDRESS	721 N. POWERLINE RD.
CITY - ST - ZIP	DEERFIELD BEACH FL 33442
TITLE	VD
NAME	GAMBEL, JUDY
STREET ADDRESS	731 N POWERLINE RD
CITY - ST - ZIP	DEERFIELD BEACH FL
TITLE	SD
NAME	CROMWELL, GLORY
STREET ADDRESS	715 N POWERLINE RD
CITY - ST - ZIP	DEERFIELD BCH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	P	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	LES AUSEY	
13 STREET ADDRESS	779 N POWERLINE RD	
14 CITY - ST - ZIP	DEERFIELD BEACH FLA 33442	
21 TITLE	T	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	DEBBY ALLEN	
23 STREET ADDRESS	751 N POWERLINE RD	
24 CITY - ST - ZIP	DEERFIELD BEACH FLA 33442	
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY - ST - ZIP		
41 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
51 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	BARBARA SCHUMER	
53 STREET ADDRESS	737 N. POWERLINE RD	
54 CITY - ST - ZIP	DEERFIELD BEACH FLA 33442	
61 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
62 NAME	WILLIAM SEEERS	
63 STREET ADDRESS	713 N POWERLINE RD.	
64 CITY - ST - ZIP	DEERFIELD BEACH FLA 33442	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.
 SIGNATURE: LES AUSEY
 Signature, typed or printed name of officer or director
 Date 4/3/95
 Signature # 305-427070