


FILE NOW: FILING FEE IS \$61.25

FILED
Feb 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 768721 (3)
1. Corporation Name
VILLA PORTOFINO HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 721 N. POWERLINE RD DEERFIELD BEACH FL 33442	Mailing Address QUALITY MGT 1761 W HILLSBORO BLVD SUITE 326 DEERFIELD BEACH FL 33442 US
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3. Date Incorporated or Qualified 06/01/1983		
4. FEI Number 59-2501056	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>

2. Principal Place of Business 21 751 VILLA PORTOFINO CIR	2a. Mailing Address 26 NORTHSTAR PROPERTY MGT.		
Suite, Apt. #, etc. 22 DEERFIELD BEACH, FL	Suite, Apt. #, etc. 27 661 HOLLOW'S CIRCLE		
City & State 23	City & State 28 DEERFIELD BEACH, FL		
Zip 24 33442	Country 25 USA	Zip 29 33442	Country 30 USA

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**FREDERICK O POKRAJAC QUALITY MGT
1761 W. HILLSBORO BLVD SUITE 326
DEERFIELD BEACH FL 33442**

10. Name and Address of New Registered Agent

81 Name PAUL H. LEVINE / NORTH STAR PROP. MGT	
82 Street Address (P.O. Box Number is Not Acceptable) 661 HOLLOW'S CIRCLE	
83 City DEERFIELD BEACH	
84 State FL	85 Zip Code 33442

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: PAUL H. LEVINE DATE: 1-27-98

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 T	<input type="checkbox"/> DELETE	1.1 TITLE T PUSEY, LES	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PUSEY, LES		1.2 NAME	
STREET ADDRESS 779 N POWERLINE RD		1.3 STREET ADDRESS 779 VILLA PORTOFINO CIRCLE	
CITY-ST-ZIP DEERFIELD BEACH FL		1.4 CITY-ST-ZIP DEERFIELD BEACH, FL 33442	
TITLE T	<input type="checkbox"/> DELETE	2.1 TITLE P ALLEN, DEBBY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ALLEN, DEBBY		2.2 NAME	
STREET ADDRESS 751 N. POWERLINE RD		2.3 STREET ADDRESS 751 VILLA PORTOFINO CIRCLE	
CITY-ST-ZIP DEERFIELD BEACH FL		2.4 CITY-ST-ZIP DEERFIELD BEACH, FL 33442	
TITLE P	<input type="checkbox"/> DELETE	3.1 TITLE D. CROMWELL, GLORY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ALLEN, DEBBY		3.2 NAME	
STREET ADDRESS 751 N. POWERLINE RD		3.3 STREET ADDRESS 715 VILLA PORTOFINO CIRCLE	
CITY-ST-ZIP DEERFIELD BEACH FL		3.4 CITY-ST-ZIP DEERFIELD BEACH, FL 33442	
TITLE D	<input type="checkbox"/> DELETE	4.1 TITLE VD SEGERS, WILLIAM	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CROMWELL, GLORY		4.2 NAME	
STREET ADDRESS 715 N POWERLINE RD		4.3 STREET ADDRESS 713 VILLA PORTOFINO CIRCLE	
CITY-ST-ZIP DEERFIELD BCH FL		4.4 CITY-ST-ZIP DEERFIELD BEACH, FL 33442	
TITLE VD	<input type="checkbox"/> DELETE	5.1 TITLE D. CHESHER, JOHN	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME SEGERS, WILLIAM		5.2 NAME	
STREET ADDRESS 713 N. POWERLINE RD.		5.3 STREET ADDRESS 749 VILLA PORTOFINO CIRCLE	
CITY-ST-ZIP DEERFIELD BEACH FL		5.4 CITY-ST-ZIP DEERFIELD BEACH, FL 33442	
TITLE D	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SEGERS, WILLIAM		6.2 NAME	
STREET ADDRESS 713 N. POWERLINE RD.		6.3 STREET ADDRESS	
CITY-ST-ZIP DEERFIELD BEACH FL		6.4 CITY-ST-ZIP	

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.

SIGNATURE: Debbi J. Allen DATE: 2/4/98 954-426-5136

CP2E037 (10/97)