


FILE NOW: FILING FEE IS \$61.25

FILED

Feb 12 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northam</b> 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 <b>721 N. POWERLINE RD DEERFIELD BEACH FL 33442</b>	Mailing Address <b>QUALITY MGT 1761 W HILLSBORO BLVD SUITE 326 DEERFIELD BEACH FL 33442 US</b>
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2. Principal Place of Business <b>21 751 VILLA PORTOFINO CIR Suite, Apt. #, etc. 22 DEERFIELD BEACH, FL City &amp; State 23 Zip 24 33442 Country 25 USA</b>	2a. Mailing Address <b>26 NORTHSTAR PROPERTY MGT. Suite, Apt. #, etc. 27 661 HOLLOWAY CIRCLE City &amp; State 28 DEERFIELD BEACH, FL Zip 29 33442 Country 30 USA</b>
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3. Date Incorporated or Qualified <b>06/01/1983</b>	4. FEI Number <b>59-2501056</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	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 <b>FREDERICK O POKRAJAC QUALITY MGT 1761 W. HILLSBORO BLVD SUITE 326 DEERFIELD BEACH FL 33442</b>	10. Name and Address of New Registered Agent <b>81 Name PAUL H. LEVINE / NORTH STAR PROP. MGT 82 Street Address (P.O. Box Number is Not Acceptable) 661 HOLLOWAY CIRCLE 83 DEERFIELD BEACH 84 City 85 Zip Code FL 33442</b>
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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  
(NOTE: Registered Agent signature required when reinstalling)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PUSEY, LES 779 N POWERLINE RD DEERFIELD BEACH FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	T PUSEY, LES 779 VILLA PORTOFINO CIRCLE DEERFIELD BEACH, FL. 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ALLEN, DEBBY 751 N. POWERLINE RD DEERFIELD BEACH FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	P ALLEN, DEBBY 751 VILLA PORTOFINO CIRCLE DEERFIELD BEACH, FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALLEN, DEBBY 751 N. POWERLINE RD DEERFIELD BEACH FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	D. CROMWELL, GLORY 715 VILLA PORTOFINO CIRCLE DEERFIELD BEACH, FL. 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CROMWELL, GLORY 715 N POWERLINE RD DEERFIELD BCH FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	VD SEGERS, WILLIAM 713 VILLA PORTOFINO CIRCLE DEERFIELD BEACH, FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SEGERS, WILLIAM 713 N. POWERLINE RD. DEERFIELD BEACH FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	D. CHESHER, JOHN 749 VILLA PORTOFINO CIRCLE DEERFIELD BEACH, FL. 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEGERS, WILLIAM 713 N. POWERLINE RD. DEERFIELD BEACH FL	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 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 Allen DATE 2/4/98 954-426-5136

CR2E037 (10/97)