

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004838

FILED  
Apr 29, 2011  
Secretary of State

**Entity Name:** PORTOFINO AT HAMMOCK DUNES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

7 FLORIDA PARK DRIVE NORTH  
SUITE C  
PALM COAST, FL 32137

**New Principal Place of Business:**

2 CAMINO DEL MAR  
PALM COAST, FL 32137

**Current Mailing Address:**

POST OFFICE BOX 353833  
PALM COAST, FL 32135

**New Mailing Address:**

**FEI Number:** 59-3739546

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SOUTHERN STATES MANAGEMENT GROUP, INC.  
7 FLORIDA PARK DRIVE NORTH  
SUITE C  
PALM COAST, FL 32137 US

**Name and Address of New Registered Agent:**

SOUTHERN STATES MANAGEMENT GROUP, INC.  
2 CAMINO DEL MAR  
PALM COAST, FL 32137 US

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.

SIGNATURE: FRED ANNON JR

04/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: CAMPENNI, THOMAS  
Address: POST OFFICE BOX 353833  
City-St-Zip: PALM COAST, FL 32135

Title: TD  
Name: GRONBACHER, FRED  
Address: POST OFFICE BOX 353833  
City-St-Zip: PALM COAST, FL 32135

Title: SD  
Name: SLAGLE, ROBERT  
Address: POST OFFICE BOX 353833  
City-St-Zip: PALM COAST, FL 32135

Title: VPD  
Name: WYROBEK, DAVID  
Address: POST OFFICE BOX 353833  
City-St-Zip: PALM COAST, FL 32135

Title: DVP  
Name: EISENBERG, LAWRENCE  
Address: POST OFFICE BOX 353633  
City-St-Zip: PALM COAST, FL 32135

I hereby 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 all other like empowered.

SIGNATURE: THOMAS CAMPENNI

PD

04/29/2011

Electronic Signature of Signing Officer or Director

Date