


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 8:00 am
Secretary of State

02-06-2006 90056 002 ****61.25

DOCUMENT # N01000008510 1. Entity Name PORTOFINO AT SUN CITY CENTER FT. MYERS PROPERTY OWNERS ASSOCIATION, INC.			
Principal Place of Business 24301 WALDEN CENTER DRIVE SUITE 300 BONITA SPRINGS, FL 34134		Mailing Address 24301 WALDEN CENTER DRIVE SUITE 300 BONITA SPRINGS, FL 34134	
2. Principal Place of Business 9411 Cypress Lake Drive Suite, Apt. # etc.		3. Mailing Address 9411 Cypress Lake Drive Suite, Apt. # etc.	
City & State Fort Myers FL		City & State Fort Myers FL	
Zip 33919		Zip 33919	
Country USA		Country USA	
4. FEI Number 59-3759316		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WCI COMMUNITIES PROPERTY MANAGEMENT INC 24301 WALDEN CENTER DRIVE SUITE 300 BONITA SPRINGS, FL 34134		7. Name and Address of New Registered Agent Name Bob Gelles Street Address (P.O. Box Number is Not Acceptable) Old School Management 9411 Cypress Lake Drive Suite #2 City Fort Myers FL Zip Code 33919	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <u>Robert E. Gelles</u> <u>Robert E. Gelles, CAM</u> <u>1/31/06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD	NAME PHILLIPS, DELORES	<input checked="" type="checkbox"/> Delete	TITLE DT
STREET ADDRESS 10539 BELLA VISTA DR	CITY-ST-ZIP FORT MYERS, FL 33913	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME Carole Johnson
TITLE VPD	NAME RADASCH, BARBARA	<input checked="" type="checkbox"/> Delete	STREET ADDRESS 10546 Bella Vista DR
STREET ADDRESS 10531 BELLA VISTA DR	CITY-ST-ZIP FORT MYERS, FL 33913	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	CITY-ST-ZIP Fort Myers, FL 33913
TITLE STD	NAME MATT, SUZANNE	<input checked="" type="checkbox"/> Delete	TITLE VP
STREET ADDRESS 10543 BELLA VISTA DR	CITY-ST-ZIP FORT MYERS, FL 33913	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME Thomas Moore
TITLE VP	NAME Jim Rapp	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	STREET ADDRESS 350 N. Ridge DR
STREET ADDRESS 10540 Bella Vista DR	CITY-ST-ZIP Fort Myers, FL 33913	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	CITY-ST-ZIP Perrysburg, OH 43551
TITLE VS	NAME Janet Warner	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	STREET ADDRESS 9932 Bella Vista Court
STREET ADDRESS 10540 Bella Vista DR	CITY-ST-ZIP Fort Myers, FL 33913	<input type="checkbox"/> Change <input type="checkbox"/> Addition	CITY-ST-ZIP Fort Myers, FL 33913
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Carole A. Johnson</u> <u>Carole A. Johnson</u> <u>239-768-6464</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			

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