## **©**006 NOT-FOR-PROFIT CORPORATION

	AMENDED AND	NUAL KEPUR	K I					
DOCUMENT # N02000002632  1. Entity Name					FILED			
PORTO VECCHIO AT MIRASOL PROPERTY OWNERS ASSOCIATION, INC.				**/	AUG 28 AM 9			
Principal Place of Business 8430 ENTERPRISE CIRCLE, SUITE 100 BRADENTON, FL 34202-4108  Mailing Address 8430 ENTERPRISE CIRCL BRADENTON, FL 34202-4108				SECRETAIN L. STATE TALLAHASSEE, FLORIDA				
0 - 1	Place of Business and Mamt	3. Mailing Address Clo Lang T	nant					
Suite, Apt. #, etc.   Suite, Apt. #, etc.   (27) PGA PLVD. #201 (27) PGA PL			VD. #20	1	hg-NP CR	2E037 (4/06)		
Palm P	seach Gardens FL.	Palin Beach C	ardens, Fl	4. FEI Number 03-042392	26	<b>⊢</b> + ∸	oplied For ot Applicable	
<sup>Zip</sup> 234	18 Palm Prach	Zip	country 1	5. Certificate of S	tatus Desired	\$8.75 Add Fee Require		
	6. Name and Address of Current Re			7. Name and Add	tress of New Register	red Agent		
SPENCER	R, MARC I	Villiam K	Isaac					
877 EXECUTIVE CENTER DRIVE W SUITE 205			Street Address P. ang Management					
ST. PETERSBURG, FL 33702-2472				6271 PGA B				
			City	Paim Beach Ga	rdens, FL 33	Zip Code	e	
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 8-16-06								
	Signature, typed or gradest name of registered agent and title ill amplicable. (NOTE: Registered Agent signature required when reinstating)							
	Signature, typed or printed name of registered agept and	title if applicable. (NOTE: R	legistered Agent signature	required when reinstating)	DA	NTE		
	Signature, typed or pursue name of recience segret and	9. Election Camp Trust Fund Cor	aign Financing	\$5.00 May Be Added to Fees	Florida De	neck payable to	tate	
10.	Amended AR is \$61.25  OFFICERS AND DIRE	9. Election Camp Trust Fund Cor	aign Financing ntribution.	\$5.00 May Be Added to Fees ADDITIONS/CHANG		partment of St	tate	
10.	Amended AR is \$61.25  OFFICERS AND DIRECTOR	9. Election Camp Trust Fund Con	aign Financing ntribution.	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Florida De	partment of St	tate	
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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.

| GNATURE: | SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #

SIGNATURE: