


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 03, 2008 8:00 am
Secretary of State

09-03-2008 90004 015 ****70.00

DOCUMENT # N02000002632

1. Entity Name
 PORTO VECCHIO AT MIRASOL PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business
 C/O LANG MGMT
 6271 PGA BLVD #201
 PALM BEACH GARDENS, FL 33418

Mailing Address
 C/O LANG MGMT
 6271 PGA BLVD #201
 PALM BEACH GARDENS, FL 33418



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country

08272008 Chg-NP CR2E037 (12/06)

6. Name and Address of Current Registered Agent

ISAACSON, WILLIAM K
 LANG MANAGEMENT
 6271 PGA BLVD #201
 PALM BEACH GARDENS, FL 33418

4. FEI Number
 03-0423926

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	WEXLER, HOWARD	
STREET ADDRESS	135 PORTO VECCHIO WAY	
CITY-ST-ZIP	PALM BEACH BEACH GARDENS, FL 33418	
TITLE	VP	<input type="checkbox"/> Delete
NAME	ROSENBERG, ARTHUR	
STREET ADDRESS	219 PORTO VECCHIO WAY	
CITY-ST-ZIP	PALM BEACH BEACH GARDENS, FL 33418	
TITLE	2VP	<input type="checkbox"/> Delete
NAME	SIEGEL, HOWARD	
STREET ADDRESS	2 GRASS FIELD RD	
CITY-ST-ZIP	KINGSPORT, NY 11024	
TITLE	T	<input type="checkbox"/> Delete
NAME	BARREA, BARBARA	
STREET ADDRESS	236 PORTO VECCHIO WAY	
CITY-ST-ZIP	PALM BEACH BEACH GARDENS, FL 33418	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	MILLER, JOSEPH	
STREET ADDRESS	235 PORTO VECCHIO WAY	
CITY-ST-ZIP	PALM BEACH BEACH GARDENS, FL 33418	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

Secretary
 Cohen, Marvin
 228 Porto Vecchio Way
 Palm Beach Gardens, FL 33418

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: Howard Wexler, President 8/27/08 561-626-8283

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #