

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007761

FILED
Apr 04, 2007
Secretary of State

Entity Name: THE PORTICOS ASSOCIATION, INC.

Current Principal Place of Business:

3839 NW BOCA RATON BLVD
STE 100A
BOCA RATON, FL 33431

New Principal Place of Business:

3837 NW BOCA RATON BLVD
BOCA RATON, FL 33431

Current Mailing Address:

3839 NW BOCA RATON BLVD
STE 100A
BOCA RATON, FL 33431

New Mailing Address:

3837 NW BOCA RATON BLVD
BOCA RATON, FL 33431

FEI Number: 02-0680585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINE, JEFFREY A
4000 NORTH FEDERAL HIGHWAY
STE 201
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

SIMON, SIGALOS, & SPYREDES, P.A.
3839 NW BOCA RATON BLVD
STE 100-A
BOCA RATON, FL 33431 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: ANASTASIOS TOM SPYREDES, ESQ

04/04/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GORDON, ROBERT J
Address: 3839 NW BOCA RATON BLVD STE 100-A
City-St-Zip: BOCA RATON, FL 33431

Title: VTD () Delete
Name: GAINES, PATRICK
Address: 3839 NW BOCA RATON BLVD STE 100-A
City-St-Zip: BOCA RATON, FL 33431

Title: SD () Delete
Name: KANIUK, JERRY
Address: 3839 NW BOCA RATON BLVD STE 100-A
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SPYREDES, ANASTASIOS T ESQ
Address: 3839 NW BOCA RATON BLVD STE 100-A
City-St-Zip: BOCA RATON, FL 33431

Title: SD (X) Change () Addition
Name: GAINES, PATRICK
Address: 3837 NW BOCA RATON BLVD
City-St-Zip: BOCA RATON, FL 33431

Title: VTD (X) Change () Addition
Name: KANIUK, JERRY
Address: 3835 NW BOCA RATON BLVD
City-St-Zip: BOCA RATON, FL 33431

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: PATRICK GAINES

SD

04/04/2007

Electronic Signature of Signing Officer or Director

Date