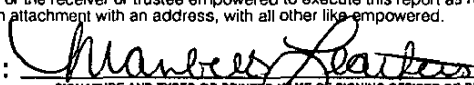


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2006 8:00 am
Secretary of State

02-24-2006 90012 049 ****70.00

DOCUMENT # N03000002825					
1. Entity Name PORTOFINO BAY PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business 21218 ST ANDREWS BLVD STE 510 BOCA RATON, FL 33433			Mailing Address C/O THE CONTINENTAL GROUP, INC. 11981 SW 144 COURT #201 MIAMI, FL 33186		
2. Principal Place of Business 381 N. KROME AVE Suite, Apt. #, etc. SUITE 205 City & State HOMESTEAD FL Zip 33030 Country USA		3. Mailing Address PO Box 901773 Suite, Apt. #, etc. # City & State HOMESTEAD FL Zip 33070 Country USA			
01302006 Chg-NP CR2E037 (11/05)		4. FEI Number 80-0063445		Applied For ☐ Not Applicable	
5. Certificate of Status Desired - ☒				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GREENFIELD, STEVEN B ESQ. 7000 W PALMETTO PARK RD STE 402 BOCA RATON, FL 33433			7. Name and Address of New Registered Agent Name ROBERT E. PAIGE, CSR Street Address (P.O. Box Number is Not Acceptable) SUITE 550 9500 SOUTH DADE AVENUE BLDG City MIAMI FL Zip Code 33156		
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 		DATE 2/21/06		(NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$61.25 Due by May 1, 2006		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP VILLAMAN, NANCY 21218 ST ANDREWS BLVD STE 510 BOCA RATON, FL 33433	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEATHERS, MARIBETH 2110 NE 37 TERRACE HOMESTEAD, FL 33033	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV VANELLA, LORRAINE 21218 ST ANDREWS BLVD STE 510 BOCA RATON, FL 33433	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD INGLETT, BRIAN 2308 NE 37 RD HOMESTEAD, FL 33033	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST CHANDLER, MARIE 21218 ST ANDREWS BLVD STE 510 BOCA RATON, FL 33433	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MONGIOVE, INGRID 2313 NE 37 RD HOMESTEAD, FL 33033	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MOREL GUETANE 2171 NE 37 TERRACE HOMESTEAD, FL 33033	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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: 			Date 2/21/06 Daytime Phone # 305-6483		