

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 30, 2009
Secretary of State

DOCUMENT# N03000002843

Entity Name: PORTOFINO SHORES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5720 SPANISH RIVER RD
FORT PIERCE, FL 34951

New Principal Place of Business:

Current Mailing Address:

5720 SPANISH RIVER RD
FORT PIERCE, FL 34951

New Mailing Address:

FEI Number: 80-0063460 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ROSS, EARLE, & BONAN P.A.
759 S. FEDERAL HWY
SUITE 212
STUART, FL 34994 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EDWARDS, TERRY
Address: 5837 SUNBERRY CR
City-St-Zip: FORT PIERCE, FL 34951

Title: VP () Delete
Name: TIPPMAN, JAMES
Address: 5521 SPANISH RIVER RD
City-St-Zip: FORT PIERCE, FL 34951

Title: T () Delete
Name: BERNING, JERRY
Address: 6251 ARLINGTON WAY
City-St-Zip: FORT PIERCE, FL 34951

Title: S () Delete
Name: PATEL, MAYUR
Address: 5641 SPANISH RIVER RD
City-St-Zip: FORT PIERCE, FL 34951

Title: D () Delete
Name: MCGAW, SCOTT
Address: 5901 SPANISH RIVER
City-St-Zip: FORT PIERCE, FL 34951

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: MARTIN, CARL
Address: 6309 SPRING LAKE
City-St-Zip: FORT PIERCE, FL 34951

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TERRY EDWARDS

P

09/30/2009

Electronic Signature of Signing Officer or Director

Date