

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002843

FILED
Apr 13, 2012
Secretary of State

Entity Name: PORTOFINO SHORES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

430 NW LAKE WHITNEY PLACE
PORT ST LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

430 NW LAKE WHITNEY PLACE
PORT ST LUCIE, FL 34986

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.
789 S FEDERAL HWY STE 101
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: T
Name: PATEL, MAYUR
Address: 430 NW LAKE WHITNEY PLACE
City-St-Zip: PORT ST LUCIE, FL 34986

Title: VP
Name: EGIDIO, FRANK
Address: 430 NW LAKE WHITNEY PLACE
City-St-Zip: PORT ST LUCIE, FL 34986

Title: D
Name: FAILLA, JOE
Address: 430 NW LAKE WHITNEY PLACE
City-St-Zip: PORT ST LUCIE, FL 34986

Title: S
Name: NAZAR, BARBARA
Address: 430 NW LAKE WHITNEY PLACE
City-St-Zip: PORT ST LUCIE, FL 34986

Title: P
Name: TIPPMANN, JAMES
Address: 430 NW LAKE WHITNEY PLACE
City-St-Zip: PORT ST LUCIE, FL 34986

I hereby 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 all other like empowered.

SIGNATURE: MAYUR PATEL

TRES

04/13/2012

Electronic Signature of Signing Officer or Director

Date