2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2004
Secretary of State

DOCUMENT# N03000009656

Entity Name: PORTOFINO TOWER FOUR HOMEOWNERS ASSOCIATION AT PENSACOLA BEACH, INC.

Current Principal Place of Business:

FOUR PORTOFINO DR.
PENSACOLA BCH, FL 32561

New Principal Place of Business:

TEN PORTOFINO DRIVE
PENSACOLA BEACH, FL 32561

Current Mailing Address:

FOUR PORTOFINO DR.
PENSACOLA BCH, FL 32561

New Mailing Address:

TEN PORTOFINO DRIVE
PENSACOLA BEACH, FL 32561

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAMPBELL, JAMES S
501 COMMENDENCIA ST.
PENSACOLA BCH, FL 32502

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: PTD ( ) Delete
Name: RINKE, ROBERT
Address: TEN PORTOFINO DR.
City-St-Zip: PENSACOLA BCH, FL 32561

Title: VSD ( ) Delete
Name: LEVIN, ALLEN R
Address: TEN PORTOFINO DR.
City-St-Zip: PENSACOLA BCH, FL 32561

Title: D ( ) Delete
Name: LEVIN, TERI
Address: TEN PORTOFINO DR.
City-St-Zip: PENSACOLA BCH, FL 32561

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition
Name: RINKE, ROBERT
Address: TEN PORTOFINO DRIVE
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: VSD (X) Change ( ) Addition
Name: LEVIN, ALLEN R
Address: TEN PORTOFINO DRIVE
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: D (X) Change ( ) Addition
Name: LEVIN, TERI
Address: TEN PORTOFINO DRIVE
City-St-Zip: PENSACOLA BEACH, FL 32561

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT RINKE PTD 04/25/2004
Electronic Signature of Signing Officer or Director — Date