FILED Apr 28, 2008 8:00 am Secretary of State 04-07-2008 90051 041 ****61.25

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N0400002574 1. Entity Name PORTOFINO III CONDOMINIUM ASSOCIATION, INC.							1, 1 4	183° Z			
Principal Place of Business ADVANCED PROPERTY MANAGEMENT 1035 COLLIER CTR WAY 7 NAPLES, FL 34110			Mailing Address ADVANCED PROPERTY MANAGEMENT 1035 COLLIER CTR WAY 7 NAPLES, FL 34110			660082 01					
2. Principal P	tace of Busin	ness - No P.O. Box #	3. Malling Address								
Suita, Apt. #, etc.			Suite, Apt. #. etc.					•	E037 (12/06)		
City & State			City & State				4. FEI Number APPLIED FO	PR 20 - 0850		pplied For ot Applicable	
Zip	Country				intry	5. Certificate of Status I			Fee Required		
8. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent Name					
THOMPSO 1035 COLI			Street Addr			(P.O. Box Number is Not Acceptable)					
7 NAPLES, FL 34110											
, <u></u> ,					City				Zip Coo	te	
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. Fam familiar with, and accept the obligations of registered agent.											
SIGNATURE Signature, typed or printed name of registered agent and title 4 applicable (MOTE: Registered Agent signature required when remaining) DATE											
Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State											
10.		OFFICERS AND DIR		11.		, A	DOITIONS/CHANGE	S TO OFFICERS AND		110	
TITLE NAME	D HANAK, J	MANNE	Oelete	MUE		Fm	nne Hanal	(,	Change ∟L.	Addition	
STREET ADDRESS	,	RGAMO WAY 101			ET ADDRESS	700	ne Hanar 1 Bergan	io way	-101		
CITY-ST-ZIP		ERS, FL 33912		CITY-	-ST-ZEP	FF.	MURB, FL	339/2			
TITLE	D	LICTA DAT	☐ Delete	E	TD,	Nonale	r	Change	☐ Addition		
NAME STREET ADORESS	1	LISTA, PAT RGAMO WAY 102		ET ADDRESS	Frank Dengler Way #202						
CITY-ST-ZIP		'ERS, FL 33912		CITY-	-ST-ZIP	FF.	Myers, FI	1. 339/2			
TITLE	D Delete III					KD1	Evangel	is Li	☐ Change	Addition	
NAME STREET ADDRESS	DENGLER, FRANK 194 SANDY KNOLL DR 5TR					Incl	Bergam	o way *	102		
CATY-ST-ZIP	DOYLESTOWN, PA 18901					Fi.	MULES, FL.	33912			
TITLE		·	☐ Delete	Imu	1	-		7 . 4	☐ Change	Addition	
NAME STREET ADDRESS				STRE	E Et adoress						
CITY-ST-ZIP					-S1-ZIP						
TILLE			Delete	TITLE	:				☐ Change	Addition	
NAME				KAM	E Et adoress						
STREET ADDRESS CITY-ST-ZIP					-ST-ZIP					i	
TITLE			Detete	ımı					Change	☐ Addition	
NAME	NAU etn										
STREET ADDRESS CITY-ST-ZIP					ET ADDRESS -ST-ZIP						
12. Thereby 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.											
7/- /20											
SIGNATURE: John M. Herrik 3/26/00											