2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N04000002576

PORTOFINO II CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business ADVANCED PROPERTY MANAGEMENT Mailing Address

ADVANCED PROPERTY MANAGEMENT

1035 COLLIE NAPLES, FL		#7	1035 COLLIER CTR WAY #7 NAPLES, FL 34110								
Advanced Property			3. Mai	ing Address Advance	roperty		Billi IIIII Billi Billi IIII)				
lanageme	m•Ser	vice. Inc	Sī	ili anaveme	rvice, Inc	02212006 C	hg-NP	CR2E0	37 (11/05)		
35 Collie	r Cente	er Way, #7	1.6)35 Collie	- Cen	ter Way, #	4 7				nlind Car
	Naples, FL 34110			Naples	<u>, FL</u>	34110	4. FEI Number 20-08505	76		— 	plied For t Applicabl
Zip		Country	Zip	0	Cou	ıntry	5. Certificate of S	Status Desired		\$8.75 Add Fee Required	
	6. Name	and Address of Current		7. Name and Address of New Registered Agent							
THOMBSO	NI CLICA	NI I				Name A	Advanced I	Property	7		
THOMPSON, SUSAN L ADVANCED PROPERTY MANAGEMENT 1035 COLLIER CTR WAY #7 NAPLES, FL 34110						Street Adwarfagenherte Service, The. 1035 Collier Center Way, #7					
		ty submits this statement fo				l ,					
SIGNATURE .		tered agent.	and the il api	olicable, (NOT	E: Registere	id Agent signature requir	ed when rainstating)		DATE	·	
	_	e is \$61.25 May 1, 2006		Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees	E		k payable to rtment of Si	
10.	1	OFFICERS AND DIF	RECTORS		11.		ADDITIONS/CHANG	GES TO OFFICER	RS AND D	IRECTORS IN	
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NAME STREET ADDRESS		E, TIRSO PORATE DRIVE SUITE	102		MAM	EET ADDRESS					
CITY+ST-ZIP	1	UDERDALE, FL 33334				r-ST-ZIP					
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NAME	ZITZMAN	IN, MICHAEL			NAM	18				_ •	_
STREET ADDRESS	600 COR	PORATE DRIVE SUITE	102		STR	EET ADDRESS					
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CITY-ST-ZIP				☐ Delete	NAM STR	i i				Change	☐ Additi

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

FILED
May 04, 2006 8:00 am
Secretary of State
05-04-2006 90197 004 ****61.25

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