

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002577

FILED  
Apr 02, 2009  
Secretary of State

**Entity Name:** PORTOFINO IV CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

ADVANCED PROPERTY MANAGEMENT  
1035 COLLIER CENTER WAY SUITE 7  
NAPLES, FL 34110

**New Principal Place of Business:**

1035 COLLIER CENTER WAY  
SUITE 7  
NAPLES, FL 34110

**Current Mailing Address:**

ADVANCED PROPERTY MANAGEMENT  
1035 COLLIER CENTER WAY SUITE 7  
NAPLES, FL 34110

**New Mailing Address:**

1035 COLLIER CENTER WAY  
SUITE 7  
NAPLES, FL 34110

**FEI Number:** 20-0850806

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ADVANCED PROPERTY MANAGEMENT SERVICE, INC.  
1035 COLLIER CENTER WAY  
SUITE 7  
NAPLES, FL 34110 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: PD ( ) Delete  
Name: VANTAGGI, FRED  
Address: 7001 BERGAMO WAY #101  
City-St-Zip: FT. MYERS, FL 33966

Title: VP ( ) Delete  
Name: VANTAGGI, LYNN  
Address: 7001 BERGAMO WAY #101  
City-St-Zip: FT MYERS, FL 33966

Title: STD ( ) Delete  
Name: OCCHUIZZO, JOHN  
Address: 12030 LUCCA ST. #202  
City-St-Zip: FT MYERS, FL 33966

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: VANTAGGI, FRED  
Address: 7001 BERGAMO WAY #101  
City-St-Zip: FT. MYERS, FL 33966

Title: DVP (X) Change ( ) Addition  
Name: VANTAGGI, LYNN  
Address: 7001 BERGAMO WAY #101  
City-St-Zip: FT MYERS, FL 33966

Title: DST (X) Change ( ) Addition  
Name: OCCHUIZZO, JOHN  
Address: 12030 LUCCA ST. #202  
City-St-Zip: FT MYERS, FL 33966

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: FRED VANTAGGI

DP

04/02/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date