

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011195

FILED  
Apr 30, 2006  
Secretary of State

**Entity Name:** THE FALLS OF PORTOFINO CONDOMINIUM NO 6 ASSOCIATION, INC.

**Current Principal Place of Business:**

21218 ST. ANDREW AVENUE SUITE 510  
BOCA RATON, FL 33433

**New Principal Place of Business:**

5555 ANGLERS AVENUE  
SUITE # 16B  
FORT LAUDERDALE, FL 33312

**Current Mailing Address:**

21218 ST. ANDREW AVENUE SUITE 510  
BOCA RATON, FL 33433

**New Mailing Address:**

5555 ANGLERS AVENUE  
SUITE # 16B  
FORT LAUDERDALE, FL 33312

FEI Number: 56-2554178

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GREENFIELD, STEVEN B  
7000 W. PALMETTO PARK RD SUITE 402  
BOCA RATON, FL 33433 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: DP ( ) Delete  
Name: VILLAMAN, NANCY  
Address: 21218 ST. ANDREW AVENUE SUITE 510  
City-St-Zip: BOCA RATON, FL 33433

Title: DVP ( ) Delete  
Name: VANCELLA, LORRAINE  
Address: 21218 ST. ANDREW AVENUE SUITE 510  
City-St-Zip: BOCA RATON, FL 33433

Title: DST ( ) Delete  
Name: SOCOLOW, LINDA  
Address: 21218 ST. ANDREW AVENUE SUITE 510  
City-St-Zip: BOCA RATON, FL 33433

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

Title: PD (X) Change ( ) Addition  
Name: VILLAMAN, NANCY  
Address: 21218 ST. ANDREW AVENUE SUITE 510  
City-St-Zip: BOCA RATON, FL 33433

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: NANCY VILLAMAN

PD

04/30/2006

Electronic Signature of Signing Officer or Director

Date