2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000555

FILED Apr 27, 2007 Secretary of State

Entity Name: VILLA PORTOFINO EAST HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5555 ANGLERS AVE. 4651 SHERIDAN STREET

16B SUITE # 480

FORT LAUDERDALE, FL 33312 US HOLLYWOOD, FL 33021 US

Current Mailing Address: New Mailing Address:

5555 ANGLERS AVE. 4651 SHERIDAN STREET

16B SUITE # 480

FORT LAUDERDALE, FL 33312 US HOLLYWOOD, FL 33021 US

FEI Number: 20-5951268 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GREENFIELD, STEVEN B ESQ.
7000 WEST PALMETTO PARK RD.
402 GREENFIELD, STEVEN B ESQ.
7000 WEST PALMETTO PARK RD.
SUITE # 402

402 SUITE # 402 BOCA RATON, FL 33433 US BOCA RATON, FL 33433 US

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: STEVEN B. GREENFIELD, ESQ. 04/27/2007

Electronic Signature of Registered Agent Date

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

Title: P () Delete Title: P (X) Change () Addition

Name: VILLAMAN, NANCY Name: VILLAMAN, NANCY
Address: 5555 ANGLERS AVE. Address: 4651 SHERIDAN STREET SUITE # 480

City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip: HOLLYWOOD, FL 33021

Title: VP () Delete Title: VP (X) Change () Addition Name: VANELLA, LORRAINE Name: VANELLA, LORRAINE

Address: 5555 ANGLERS AVE. Name. VANELLA, LORRAINE

Address: 4651 SHERIDAN STREET SUITE # 480

City-St-Zip: FORT LAUDERDALE, FL 33312 Address: 4001 Sheridan Street Softe #

Title: S, T () Delete Title: S, T (X) Change () Addition Name: FORTIER, GEOVANNA Name: FORTIER, GEOVANNA

Address: 5555 ANGLERS AVE. Address: 4651 SHERIDAN STREET SUITE # 480

City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip: HOLLYWOOD, FL 33021

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: NANCY VILLAMAN P 04/27/2007