2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# N06000006533

Entity Name: VILLAS OF PORTOFINO AT FT. PIERCE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

5995 FAVIAN AVE.
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

5995 FAVIAN AVE
PORT ST. LUCIE, FL 34986

Current Mailing Address:

5995 FAVIAN AVE.
PORT ST. LUCIE, FL 34986

New Mailing Address:

4208 18TH AVENUE
BROOKLYN, NY 11218

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUNDY, RICHARD C
5995 FAVIAN AVE.
PORT ST. LUCIE, FL 34986 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: LUNDY, RICHARD C
Address: 5995 FAVIAN AVE.
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: VTD ( ) Delete
Name: PUDERBEUTEL, MURRAY
Address: 4208 18TH AVE.
City-St-Zip: BROOKLYN, NY 11218

Title: D ( ) Delete
Name: PUDERBEUTEL, MICHAEL
Address: 4208 18TH AVE.
City-St-Zip: BROOKLYN, NY 11218

Title: S ( ) Delete
Name: MCCOY, JENNIFER
Address: 5995 FAVIAN AVE.
City-St-Zip: PORT ST. LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: MURRAY PUDERBEUTEL MR. 04/29/2008
Electronic Signature of Signing Officer or Director — Date