

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Dec 05, 2012**  
**Secretary of State**

DOCUMENT# N06000008611

**Entity Name:** PORTOFINO NEIGHBORHOOD ASSOCIATION AT VENETIAN BAY, INC.**Current Principal Place of Business:**424 LUNA BELLA LN  
SUITE 135-1  
NEW SMYRNA BCH, FL 32168**New Principal Place of Business:****Current Mailing Address:**424 LUNA BELLA LN  
SUITE 135-1  
NEW SMYRNA BCH, FL 32168**New Mailing Address:****FEI Number:** 20-5412031**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**JOHNSON, JERRY S  
424 LUNA BELLA LN  
#135  
NEW SMYRNA BCH, FL 32168 US**Name and Address of New Registered Agent:**GREEN, GAIL  
6093 SABAL BROOK WAY  
PORT ORANGE, FL 32128 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: GAIL GREEN

12/05/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** DP  
**Name:** SHANINIAN, DAVID  
**Address:** 161 BAY STREET, SUITE 2400  
**City-St-Zip:** TORONTO, ON M5J 2S1 CA**Title:** DST  
**Name:** PHAM, MARTIN  
**Address:** 6009 QUINPOOL ROAD, 10TH FLOOR  
**City-St-Zip:** HALIFAX, NS B3K 5J7 CA**Title:** D  
**Name:** MORLEY, NEIL  
**Address:** 6009 QUINPOOL ROAD, 10TH FLOOR  
**City-St-Zip:** HALIFAX, NS B3K 5J7 CA

I hereby 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 all other like empowered.

SIGNATURE: DAVID SHAHINIAN

DP

12/05/2012

Electronic Signature of Signing Officer or Director

Date