

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 26, 2012
Secretary of State

DOCUMENT# N09000001709

Entity Name: PORTOFINO VILLA ASSOCIATION, INC.**Current Principal Place of Business:**2481 DEL PRADO BLVD. N., STE. 107 PMB 19
CAPE CORAL, FL 33909**New Principal Place of Business:**%GULF BREEZE MANAGEMENT SERVICES, LLC
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135**Current Mailing Address:**2481 DEL PRADO BLVD. N., STE. 107 PMB 19
CAPE CORAL, FL 33909**New Mailing Address:**%GULF BREEZE MANAGEMENT SERVICES, LLC
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135**FEI Number:** 35-2419723**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WILSON, STEPHEN G
9130 GALLERIA COURT
SUITE 200
NAPLES, FL 34109 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
Name: NOLAN, EDWARD R
Address: 9130 GALLERIA COURT, SUITE 200
City-St-Zip: NAPLES, FL 34109**Title:** VPD
Name: FILIAULT, ALAIN
Address: 9130 GALLERIA COURT, SUITE 200
City-St-Zip: NAPLES, FL 34109**Title:** STD
Name: WILSON, STEPHEN G
Address: 9130 GALLERIA COURT, SUITE 200
City-St-Zip: NAPLES, FL 34109

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: EDWARD R. NOLAN

PRES

04/26/2012

Electronic Signature of Signing Officer or Director

Date