

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30538

FILED
Apr 17, 2009
Secretary of State

Entity Name: PORTOFINO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O DMS INC
6041 KIMBELRY BLVD STE D
N. LAUDERDALE, FL 33068 US

New Principal Place of Business:

Current Mailing Address:

C/O DMS INC
PO BOX 590577
TAMARAC, FL 33359 US

New Mailing Address:

FEI Number: 65-0402496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DMS, INC.
6041 KIMBERLY BLVD STE D
N. LAUDERDALE, FL 33068 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: PIGUET, JAMES
Address: 11349 LAKEVIEW DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: DT () Delete
Name: BAKER, STEVE
Address: 11325 LAKEVIEW DR
City-St-Zip: CORAL SPRINGS, FL 33071

Title: DD () Delete
Name: CARONNA, RICK
Address: 11317 LAKEVIEW DR
City-St-Zip: CORAL SPRINGS, FL

Title: DVP () Delete
Name: BARAD, PAUL
Address: 11309 LAKEVIEW DR
City-St-Zip: CORAL SPRINGS, FL 33071

Title: DS () Delete
Name: LADER, EDWARD
Address: 11329 LAKEVIEW DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

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:

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: JAMES PIGUET

PD

04/17/2009

Electronic Signature of Signing Officer or Director

Date