

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$234.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000002947

1. Corporation Name

PORTOFINO HOMEOWNERS ASSOCIATION AT PENSACOLA BEACH, INC.

Principal Place of Business

C/O JAMES S. CAMPBELL, ESO.
3 WEST GARDEN STREET 7TH FLOOR
PENSACOLA FL 32501

Mailing Address

C/O JAMES S. CAMPBELL, ESO.
3 WEST GARDEN STREET 7TH FLOOR
PENSACOLA FL 32501

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/22/1998	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number APPLIED FOR	
22		27		Applied For Not Applicable	
23		28		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24		29		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25		30			

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOKMANYA, INC.
C/O PACIFIC PHOTOCOPY & RESEARCH SERVICE
1018 THOMASVILLE ROAD STE B-200
TALLAHASSEE FL 32303

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		1.2 NAME	Allen R. Levin
STREET ADDRESS		1.3 STREET ADDRESS	2200 Via DeLuna Drive
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Pensacola Beach, FL 32561
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	Robert L. Rinke
STREET ADDRESS		2.3 STREET ADDRESS	2200 Via DeLuna Drive
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Pensacola Beach, FL 32561
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	Teresa Levin
STREET ADDRESS		3.3 STREET ADDRESS	2200 Via DeLuna Drive
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Pensacola Beach, FL 32561
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

9/13/99

Date

Daytime Phone #

001261

CR2E037 (5/99)