2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000331

FILED Feb 21, 2009 Secretary of State

Entity Name: PORTOFINO VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5055 SW 171ST AVENUE MIRAMAR, FL 33027

Current Mailing Address: New Mailing Address:

5055 SW 171ST AVENUE C/O CASTLE MANAGEMENT PO BOX 559009 MIRAMAR, FL 33027 FORT LAUDERDALE, FL 33355

FEI Number: 65-0977954 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KATZMAN GARFINKEL, P.A. 1501 N.W. 49TH ST. SUITE 202

FT. LAUDERDALE, FL 33309 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete

(X) Change () Addition CUEVAS, RON BAYLISS, MITCH Name: Name: 16895 SW 49TH COURT Address: 16891 SW 49TH COURT Address: City-St-Zip: MIRAMARA, FL 33027 City-St-Zip: MIRAMAR, FL 33027

Title: VPD Title: (X) Change () Addition () Delete MULE, MARIO Name: BRUCKENSTEIN, JOEL Name:

Address: 4927 SW 167TH AVE Address: 5088 SW 168TH AVE City-St-Zip: MIRAMAR, FL 33027 City-St-Zip: MIRAMAR, FL 33027

Title: () Delete Title: STD (X) Change () Addition

MESIKA, ELIYAHU Name: BENITEZ, MARCO Name: 16820 SW 49TH COURT Address: 16899 SW 49TH COURT Address: City-St-Zip: MIRAMARA, FL 33027 City-St-Zip: MIRAMAR, FL 33027

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: ROBERT A DONNELLY MGR 02/21/2009