

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004970

FILED
Feb 26, 2009
Secretary of State

Entity Name: YACHT CLUB AT PORTOFINO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

90 ALTON RD
MIAMI, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

90 ALTON RD
MIAMI, FL 33139 US

New Mailing Address:

FEI Number: 65-0939676

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALPERN, MARC A ESQ.
HALPERN RODRIGUEZ, LLP
800 SOUTH DOUGLAS ROAD, SUITE 880
CORAL GABLES, FL 33134 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: P () Delete
Name: LEBLANC, LILLIAN J
Address: 90 ALTON RD UNIT 2710
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP () Delete
Name: COMPAGNONE, JOHN
Address: 90 ALTON RD UNIT 2608
City-St-Zip: MIAMI BEACH, FL 33139

Title: S () Delete
Name: SHULMAN, MARVIN
Address: 90 ALTON RD UNIT 3210
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: T () Delete
Name: ROSEN, GERALD
Address: 100 S PT DR UNIT 1101
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: CALVIN, EDGAR
Address: 90 ALTON RD UNIT 1801
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COMPAGNONE, JOHN
Address: 90 ALTON RD UNIT 2508
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP (X) Change () Addition
Name: CALVIN, EDGAR
Address: 90 ALTON RD UNIT 1801
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: ROSEN, GERALD
Address: 100 S PT DR UNIT 2804
City-St-Zip: MIAMI BEACH, FL 33139

Title: D (X) Change () Addition
Name: COHN, PAUL
Address: 90 ALTON RD UNIT 1611
City-St-Zip: MIAMI BEACH, FL 33139

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: JOHN COMPAGNONE

P

02/26/2009

Electronic Signature of Signing Officer or Director

Date