

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000133273

FILED
Apr 08, 2009
Secretary of State

Entity Name: PRIME HOMES AT PORTOFINO MEADOWS, INC.

Current Principal Place of Business:

4651 SHERIDAN STREET
SUITE # 480
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

4651 SHERIDAN STREET
SUITE # 480
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 20-5758702

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENFIELD, STEVEN B
7000 W. PALMETTO PARK RD.
402
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

GREENFIELD, STEVEN B ESQ
7000 W. PALMETTO PARK RD.
SUITE # 402
BOCA RATON, FL 33433 US

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: STEVEN B. GREENFIELD

04/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ABBO, FRED
Address: 4651 SHERIDAN STREET SUITE # 480
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: VSD () Delete
Name: ABBO, LARRY M
Address: 4651 SHERIDAN STREET SUITE # 480
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: T () Delete
Name: ABBO, EVA
Address: 4651 SHERIDAN STREET SUITE # 480
City-St-Zip: HOLLYWOOD, FL 33021 US

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY M. ABBO

VSD

04/08/2009

Electronic Signature of Signing Officer or Director

Date