2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713811

Entity Name: PORTOFINO CONDOMINIUM APTS. OF PALM BEACH, INC.

FILED Apr 08, 2024 Secretary of State 0487298676CC

Current Principal Place of Business:

2600 NORTH FLAGLER DRIVE WEST PALM BEACH. FL 33407

Current Mailing Address:

2600 NORTH FLAGLER DRIVE WEST PALM BEACH, FL 33407

FEI Number: 59-1265297 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LEAVY LAW, PA/ MARIA S. LEAVY 800 VILLAGE SQUARE CROSSING, SUITE 347 PALM BEACH GARDENS, FL 33410 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title **PRESIDENT** Title **SECRETARY** MICHELLE, ALBER DRAKE, DAN Name Name

2600 N. FLAGLER DRIVE 2600 N. FLAGLER DR Address Address

City-State-Zip: WEST PALM BEACH FL 33407 WEST PALM BEACH FL 33407 City-State-Zip:

VΡ Title Title DIRECTOR

Name GRADY, BARBARA LINDSAY, CAROL Name Address 2600 N. FLAGLER DR. Address 2600 NORTH FLAGLER DRIVE

WEST PALM BEACH FL 33407 City-State-Zip: City-State-Zip: WEST PALM BEACH FL 33407

Title DIRECTOR Title **TREASURER**

Name FARKAS, JONATHAN FLYNN, PATRICK Name

Address 2600 NORTH FLAGLER DRIVE Address 2600 NORTH FLAGLER DRIVE 607 106

City-State-Zip: WEST PALM BEACH FL 33407 City-State-Zip: WEST PALM BEACH FL 33407

DIRECTOR Title

Name PORTER, MIRIAM

Address 2600 NORTH FLAGLER DRIVE

204

WEST PALM BEACH FL 33407 City-State-Zip:

I hereby 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 all other like empowered.

04/08/2024 SIGNATURE: MICHELLE ALBER **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date