

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

0072056

03-29-2002 90364 001 *2,695.00

DOCUMENT # 747550
 1. Entity Name
PORTOFINO VILLAGE I "B" CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 1310 AVENUE OF THE STARS COCONUT CREEK FL 33066 US	Mailing Address 1310 AVENUE OF THE STARS COCONUT CREEK FL 33066 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1906205		Applied For
		Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RAVO, PAT T.
1310 AVENUE OF THE STARS
% WYNMOOR COMMUNITY COUNCIL, INC.
COCONUT CREEK FL 33066

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> Delete
NAME	SCHOLMAN, PAUL
STREET ADDRESS	3001 PORTOFINO ISLE APT H3
CITY-ST-ZIP	COCONUT CREEK FL 33066
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	KURTZ, EARL
STREET ADDRESS	3001 PORTOFINO ISLE APT K3
CITY-ST-ZIP	COCONUT CREEK FL 33066
TITLE	SD <input type="checkbox"/> Delete
NAME	SUSSER, JERMONE
STREET ADDRESS	3001 F2 PORTOFINO ISLE
CITY-ST-ZIP	COCONUT CREEK, FL 0
TITLE	D <input type="checkbox"/> Delete
NAME	LOW, STANLEY
STREET ADDRESS	3001 PORTOFINO ISLE APT C-1
CITY-ST-ZIP	COCONUT CREEK, FL 0 33066
TITLE	TD <input type="checkbox"/> Delete
NAME	SCHALMAN, MIRIAM
STREET ADDRESS	3001 L-1 PORTOFINO ISLE
CITY-ST-ZIP	COCONUT CREEK, FL 0
TITLE	PD <input type="checkbox"/> Delete
NAME	RATTNER, WILLIAM
STREET ADDRESS	3001 E4 PORTOFINO ISLE
CITY-ST-ZIP	COCONUT CREEK FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William Rattner*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/02/02
 Date Daytime Phone #

CR2E037 (9/01)