

2001 UNIFORM BUSINESS REPORT (UBR)

03-26-2001 90157001*2,695.00

0036277

DOCUMENT # 747552

1. Entity Name

PORTOFINO VILLAGE I "D" CONDOMINIUM ASSOCIATION,

Principal Place of Business

1310 AVENUE OF THE STARS
COCONUT CREEK FL 33068
US

Mailing Address

1310 AVENUE OF THE STARS
COCONUT CREEK FL 33068
US

FILED
01 MAR 26 AM 11: 26
SECRETARY OF STATE
TALLAHASSEE FLORIDA

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1906200

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

RAVO, PAT T.
1310 AVENUE OF THE STARS
% WYNMOOR COMMUNITY COUNCIL, INC.
COCONUT CREEK FL 33068

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME WORTMAN, CHARLOTTE
STREET ADDRESS 3004 B1 PORTOFINO ISLE
CITY-ST-ZIP COCONUT CREEK FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD
NAME RITCHIE, HARRY
STREET ADDRESS 3004 B4 PORTOFINO ISLE
CITY-ST-ZIP COCONUT CREEK FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD
NAME HIMMELFARB, DIANE
STREET ADDRESS 3004 PORTOFINO ISLE APT D1
CITY-ST-ZIP COCONUT CREEK FL 33068 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME WASSERMAN, STELLA
STREET ADDRESS 3004 PORTOFINO ISLE APT 02
CITY-ST-ZIP COCONUT CREEK FL 33068 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME SCHECHTER, CARRIE
STREET ADDRESS 3004 PORTOFINO ISLE APT C1
CITY-ST-ZIP COCONUT CREEK FL 33068 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Charlotte Wortman CHARLOTTE WORTMAN 1/18/01 (954) 978-2600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E037 (10/00)