

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 762830

1. Entity Name

PORTO FINO APARTMENTS CONDOMINIUM ASSOCIATION, I

FILED  
Jul 18, 2001 8:00 am  
Secretary of State

07-18-2001 90012 030 \*\*\*\*61.25

Principal Place of Business

Mailing Address

143-94TH AVE #8  
TREASURE ISLAND FL 33706

143 - 94 AVE  
SUITE 7  
TREASURE ISLAND FL 33706  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3052903

Applied For

Not Applicable

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

STEAGALL, BARRY M. (ATTY)  
6500 CENTRAL AVE.  
ST. PETERSBURG FL 33707

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

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  
After September 12, 2001, min. will be \$236.25

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 PD  
NAME ONESSIMO, LISA ☐ Delete  
STREET ADDRESS 143 94 AVE. #7  
CITY-ST-ZIP TREASURE ISLAND FL 33706

TITLE VD  
NAME NORTON, DANIEL ☒ Delete  
STREET ADDRESS 143 - 94 AVE #4  
CITY-ST-ZIP TREASURE ISLAND FL 33706

TITLE STD  
NAME HUFTMAN, GLORIA ☒ Delete  
STREET ADDRESS 18615 AVE CAPRI  
CITY-ST-ZIP LUTZ FL 33549

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE VD ☒ Change ☐ Addition  
NAME Richard McELROY  
STREET ADDRESS 143-94TH AVE #1  
CITY-ST-ZIP TREASURE ISLAND, FL 33706

TITLE STD ☒ Change ☐ Addition  
NAME GEORGE W. WILLIAMS  
STREET ADDRESS 30-82ND AVE  
CITY-ST-ZIP TREASURE ISLAND, FL 33706

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

TITLE ☐ Change ☐ Addition  
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: *George W. Williams* GEORGE W. WILLIAMS

7/12/01 727-360-9403

CR2E037 (5/01)

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DO NOT WRITE IN THIS SPACE