

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000003434

1. Entity Name

NATIONAL FLEA MARKET ASSOCIATION, INC.

FILED

Feb 27, 2001 8:00 am  
Secretary of State

02-27-2001 90339 019 \*\*\*\*70.00

Principal Place of Business

2801 E. IRLO BRONSON HIGHWAY  
KISSIMMEE FL 34747

Mailing Address

2801 E. IRLO BRONSON HIGHWAY  
KISSIMMEE FL 34747

2. Principal Place of Business

3. Mailing Address

24 Pine Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Windermere Fl.

4. FEI Number

56-2082306

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

HABER, LAWRENCE H ESQ.  
111 N. ORANGE AVENUE, SUITE 1200  
ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name FRANK A BUONAURO JR

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

24 Pine Street

City Windermere FL Zip Code 34786

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

*Frank A Buonauro Jr* CHAIRMAN OF BOARD 2/20/01  
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

TITLE	C	<input type="checkbox"/> Delete
NAME	GRESSER, BILL	
STREET ADDRESS	6991 E. CAMELBACK ROAD	
CITY-ST-ZIP	SCOTTSDALE AZ 85251	
TITLE	VC	<input type="checkbox"/> Delete
NAME	SIMMONS, RON	
STREET ADDRESS	2602 MAYFIELD ROAD	
CITY-ST-ZIP	GRAND PRAIRIE TX 75052	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ROSE, RED	
STREET ADDRESS	3751 E. HARRISBURG PIKE	
CITY-ST-ZIP	MIDDLETOWN PA 17057	
TITLE	D	<input type="checkbox"/> Delete
NAME	NELSON, BARBARA	
STREET ADDRESS	2720 W. 7 MILE ROAD	
CITY-ST-ZIP	CALEDONIA WI 53108	
TITLE	P	<input type="checkbox"/> Delete
NAME	BUONAURO, FRANK	
STREET ADDRESS	2801 E. IRLO BRONSON HWY	
CITY-ST-ZIP	KISSIMMEE FL 34744	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	FRANCATI, DAN	
STREET ADDRESS	438 MAIN STREET	
CITY-ST-ZIP	BUFFALO NY 14022	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	President	<input checked="" 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	CHAIRMAN OF BOARD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRANK BUONAURO	
STREET ADDRESS	24 Pine Street	
CITY-ST-ZIP	Windermere Fl. 34786	
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 another like empowered.

SIGNATURE:

*Frank A Buonauro Jr* CHAIRMAN 2/20/01 407-876-3595  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)