FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 721677

1. Corporation Name

BOCA TEECA CONDOMINIUM NO. 4, INC.

Princ	ipal P	lace (of Busines	s
6161	NW 2	ND A	VE	
BOC	A RAT	ON F	L 33487	

Mailing Address

6161 NW 2ND AVE **BOCA RATON FL 33487**

FILED Apr 08, 1999 8:00 am § Secretary of State

04-08-1999 90110 021 ****61.25



2. Principal Place of Business		2a. Mailir	2a. Mailing Address			3. Date Incorporated or Qualifed			
21		26			_	09/10/1971			
Suite, Apt. #, etc.		Suite, Apt. #, etc.				4. FEI Number Applied For			
22		27	27						
City & State		City &	City & State			5. Certificate of Status Desired \$8.75 Additional			
23		28				5. Certificate of Status Desired Fee Required			
Zip	Country	Zip		Country	'	6. Election Campaign Financing \$5.00 May Be			
24	25	29	30)		Trust Fund Contribution Added to Fees			
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
				A 81	Name	ointe Management Group Inc.			
NOUGH I	THE		/	0 82	82 Street Address (P.O. Box Number is Not Acceptable)				
	NOLISH, ETHEL ' 5961 NW 2ND AVE					7540 U.S. HWU UM Ste 104			
317	SIND AVE			83					
* **	TON EL 22407			<u></u>	-	85 Zip Code			
	TON FL 33487		>	84	Lanta	ena FL 33462			
11. Pursuant	to the provisions of Sections 617.0502	and 617.150	8, Florida Statutes,	the abov	e-named cor	orporation submits this statement for the purpose of changing its registered			
office or r	egistered agent, or both, in the state of	Florida, SU	h change was buth	Crized by	the corporat	orporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered			
	m ramiliar with, and accept the congain		on on the state of		" <u>~</u>	-			
SIGNATURE	Signature, typed or printed name of registered agent	and the papelica	ble. MOLE: Re	gistered Age	nt signature requi	uired when reinstating) DATE			
12.	OFFICERS AND			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P		DELETE	1.1 TITLE	1	Bresident Change Addition			
NAME.	SLUTSKY, HENRY	_	<u> </u>	-1.2 NAME		Peter 192022aro			
STREET ADDRESS	6161 NW 2ND AVE			1.3 STREE	TADDRESS 5	WI HIMLY END HUP			
CITY-ST-ZIP	BOCA RATON FL			1.4 CITY-S	T-ZIP	Boce Roton FU33487			
TITLE	VP		DELETE	2.1 TITLE		Treasurer Change Addition			
NAME	FISCHER, HERBERT		<i>(</i> *	2.2 NAME	#	Am Ainspan.			
STREET ADDRESS 6161 NW 2ND AVE				2.3 STREET ADDRESS		0161 NW 22 11C			
CITY-ST-ZIP	BOCA RATON FL 33487	-	ا ينجب مست	2. 4 CITY-5	ST-ZIP	Pirc Ration, FL 33487			
TITLE	VP		☐ DELETE	3.1 TITLE	. 5	Change Addition			
NAME	EPHRAIM, ZACHARY			3.2 NAME	(•	Horay Calley			
STREET ADDRESS 6161 NW 2ND AVE						Law My. 200 Ave			
	BOCA RATON FL 33487			3.4. CITY-		Boce Kedun FC 35487			
CITY-ST-ZIP	TD		☐ DELETE	4.1 TITLE		Director Change Addition			
NAME	CEGLIO, JOSEPH			4. 2 NAME		begon Ceglio			
STREET ADDRESS	6161 NW 2ND AVE				TADORESS (will how that Ave			
CITY-ST-ZIP	BOCA RATON FL 33487			4.4 CITY-S		Bucc Raton FU 33487			
TITLE	D		DELETE	5.1 TITLE		Director Change Addition			
NAME	ARNHEIM, CECILE			5.2 NAME					
STREET ADDRESS	6161 NW 2ND AVE			5.3 STREE	TADORESS C	bel Briggerd Ave			
	BOCA RATON FL 33487			5.4 CITY-S	T-ZIP	Boce Ration FL 33487			
CITY-ST-ZIP TITLE	D		☐ DELETE	6.1 TITLE		Change Addition			
NAME	-		_	6.2 NAME	10	Soci Toccore.			
	NOLISH, ESTHER			6.3 STREE	TADORESS	wild Ne 2rd Ave			
STREET ADDRESS	5961 NW 2ND AVE			6.4 CITY-5	T-ZIP	Book Reton FL 33487			
CITY-ST-ZIP	BOCA RATON FL			U,- O(1)*C					

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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: