## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Apr 12, 2006 8:00 am Secretary of State **DOCUMENT # 745983** 1. Entity Name 04-12-2006 90087 016 \*\*\*\*61.25 BOCA TEECA CONDOMINIUM NO. 9, INC. Principal Place of Business Mailing Address 198 NORTHWEST 67TH STREET BOCA RATON FL 33487 198 NORTHWEST 67TH STREET BOCA RATON FL 33487 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 59-1964872 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RONALD ERHARDT TESLER, JEROME J Street Address (P.O. Box Number is Not Acceptable) 6500 NW 2ND AVE. **BOCA RATON FL 33487** 6400 N.W. 274 AV 井 221 Zip Code 33487 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE X Delete TITLE ☐ Change ☐ Addition TESLER, JEROME J NAME NAME 6500 NW 2ND AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIE **BOCA RATON FL** CITY-ST-ZIP b No ☐ Delete TITLE TITLE Change Addition ROSEN, ED BARBARA CAMBIA NAME NAME 198 NW 674 ST #505 STREET ADDRESS 198 W 67TH ST. STREET ADDRESS **BOCA RATON FL 33487** CITY-ST-ZIP CITY-ST-ZIP BOCA RATON, FL 33487 TITLE ☐ Delete TITLE ☐ Change ☐ Addition SOLOMON, PHLLLIS NAME STREET ADDRESS 6400 NW 2ND AVENUE STREET ADDRESS BOCA RATON FL 33487 CITY-ST-ZIP CITY-ST-ZIP W P TITLE ☐ Delete TITLE ☐ Change Addition ERHARDT, RON NAME NAME 6400 NW 2ND AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33487** CITY-ST-ZIP D ☐ Delete TITLE TITLE Change ☐ Addition FRADIN, SHIRLEY NAME 6400 NW 2ND AVE. STREET ADDRESS STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP CITY-ST-ZIP מו Delete Addition TITLE TITLE ☐ Change Elinor Lichtenstein KAESTLER, BERD NAME NAME STREET ADDRESS 6500 NW 2ND AVE 6500 NW 2nd Ave STREET ADDRESS BOCA RATON FL 33487 Boca ration ILL 33487 CITY-ST-7IP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, 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 ether like empowered.

SIGNATURE:

**FILED**