

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 756044 1. Entity Name BOCA TEECA CONDOMINIUM NO. 10, INC.						FILED 07 SEP 26 PM 2:11 SECRETARY OF STATE TALLAHASSEE, FLORIDA 			
Principal Place of Business 5240 NW 2ND AVENUE BOCA RATON, FL 33487 US				Mailing Address 5240 NW 2ND AVENUE BOCA RATON, FL 33487 US					
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.					
City & State Zip Country				City & State Zip Country					
4. FEI Number 59-2261906				Applied For ☐ Not Applicable					
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent AGGANIS, ARTHUR 5340 NW 2ND AVE, # 120 BOCA RATON, FL 33487				7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
Amended AR is \$61.25				9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees			
Make check payable to Florida Department of State									
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P AGGANIS, ARTHUR 5340 NW 2ND AVE, # 530 BOCA RATON, FL 33487 ☐ Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JOHN KAMINSKI 5340 NW 2ND AVE # 522 BOCA RATON, FL 33487 ☐ Change ☒ Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S POLY, ARTHUR 5340 NW 2ND AVE, # 527 BOCA RATON, FL 33487 ☐ Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	300110941973 10/18/07--01018--005 **\$1.25 ☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T NICOLOPULOS, ROSE 5280 NW 2ND AVE, # 113 BOCA RATON, FL 33487 ☐ Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP DECOURS, JAMES 5280 NW 2ND AVE #315 BOCA RATON, FL 33487 ☐ Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MAGRI, ANTHONY 5340 NW 2ND AVE #525 BOCA RATON, FL 33487 ☐ Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VOGT, TONI 5260 NW 2ND AVE #515 BOCA RATON, FL 33487 ☐ Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 other like empowered.									
SIGNATURE: <u>Rose M. Nicolopoulos</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				<u>9/21/07</u> Date				<u>561-995-2490</u> Daytime Phone #	

jc 10/11