

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 20, 2001 8:00 am  
Secretary of State

04-20-2001 90309 045 \*\*\*\*61.25

DOCUMENT # 771165

1. Entity Name

BOCA ENTRADA I CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

10110 BOCA ENTRADA BLVD.  
BOCA RATON FL 33428

Mailing Address

10110 BOCA ENTRADA BLVD  
~~102~~ 102  
BOCA RATON FL 33428-5841

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#102

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2355820

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

LEVIN, CHERYL J P.A.  
COURTYARD BUSINESS CENTER  
10226 NW 47TH STREET  
SUNRISE FL 33351

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T ☐ Delete  
NAME: GELHOUS, THOMAS  
STREET ADDRESS: 10110 BOCA ENTRADA BLVD 203  
CITY-ST-ZIP: BOCA RATON FL 33428-5841

VICE PRESIDENT + TREASURER ☐ Change ☒ Addition  
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:

DP ☐ Delete  
NAME: SEARCY, LARRY  
STREET ADDRESS: 10110 BOCA ENTRADA 402  
CITY-ST-ZIP: BOCA RATON FL 33428-5841

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

VPD ☒ Delete  
NAME: TECLE, ABEBE  
STREET ADDRESS: 10110 BOCA ENTRADA BLVD, #401  
CITY-ST-ZIP: BOCA RATON FL 33428-5841

Joseph ☐ Change ☐ Addition  
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:

D ☒ Delete  
NAME: WOLFE, SUSAN  
STREET ADDRESS: 10110 BOCA ENTRADA BLVD 302  
CITY-ST-ZIP: BOCA RATON FL 33428-5841

SECRETARY ☒ Change ☒ Addition  
NAME: TARIK MASON  
STREET ADDRESS: 10110 BOCA ENTRADA BLVD #208  
CITY-ST-ZIP: BOCA RATON FL 33428

D ☒ Delete  
NAME: GARRITY, WILLIAM  
STREET ADDRESS: 10110 BOCA ENTRADA BLVD # 304  
CITY-ST-ZIP: BOCA RATON FL 33428

DIRECTOR ☒ Change ☒ Addition  
NAME: PATRICIA I BELL  
STREET ADDRESS: 10110 BOCA ENTRADA BLVD #102  
CITY-ST-ZIP: BOCA RATON FL 33428

☐ Delete  
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:

DIRECTOR ☐ Change ☐ Addition  
NAME: JOE PARE  
STREET ADDRESS: 10110 BOCA ENTRADA BLVD #105  
CITY-ST-ZIP: BOCA RATON FL 33428

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: PATRICIA I BELL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/01 954 5016961

Date

Daytime Phone #

CR2E037 (10/00)