

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 728492

**Entity Name:** BOCA TEECA CONDOMINIUM NO. 6, INC.

**Current Principal Place of Business:**

C/O QUALITY MANAGEMENT GROUP  
6600 W ROGERS CIRCLE SUITE 9  
BOCA RATON, FL 33487

**Current Mailing Address:**

C/O QUALITY MANAGEMENT GROUP  
6600 W ROGERS CIRCLE SUITE 9  
BOCA RATON, FL 33487 US

**FEI Number:** 59-1473556

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LANDOL LAW FIRM, P.A.  
2101 CORPORATE BLVD  
410  
BOCA RATON, FL 33431 US

*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:** SAMUEL LANDOL

04/12/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MILLHONE, MARK  
Address        C/O QUALITY MANAGEMENT GROUP  
                  6600 W ROGERS CIRCLE SUITE 9  
City-State-Zip: BOCA RATON FL 33487

Title            TREASURER  
Name            CZECZKO, KRISTOF  
Address        C/O QUALITY MANAGEMENT GROUP  
                  6600 W ROGERS CIRCLE SUITE 9  
City-State-Zip: BOCA RATON FL 33487

Title            VP  
Name            FAZIO, MICHAEL  
Address        C/O QUALITY MANAGEMENT GROUP  
                  6600 W ROGERS CIRCLE SUITE 9  
City-State-Zip: BOCA RATON FL 33487

Title            DIRECTOR  
Name            BARBOSA, MARCOS  
Address        C/O QUALITY MANAGEMENT GROUP  
                  6600 W ROGERS CIRCLE SUITE 9  
City-State-Zip: BOCA RATON FL 33487

Title            DIRECTOR  
Name            UMANSKY, MORRIS  
Address        C/O QUALITY MANAGEMENT GROUP  
                  6600 W ROGERS CIRCLE SUITE 9  
City-State-Zip: BOCA RATON FL 33487

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARK MILLHONE

PRESIDENT

04/12/2023

Electronic Signature of Signing Officer/Director Detail

Date