

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735716

Entity Name: BOCA TEECA CONDOMINIUM NO. 8, INC.**Current Principal Place of Business:**11784 W. SAMPLE RD.
#103
CORAL SPRINGS, FL 33065**Current Mailing Address:**11784 W. SAMPLE RD.
#103
CORAL SPRINGS, FL 33065 US**FEI Number:** 59-1689831**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**UNITED COMMUNITY MANAGEMENT CORP.
11784 W. SAMPLE RD.
#103
CORAL SPRINGS, FL 33065 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	D
Name	ALIBRANDI, MICHAEL
Address	6000 NW 2 AVE #438
City-State-Zip:	BOCA RATON FL 33487

Title	TS
Name	DADDINO, SUSANNE
Address	6200 NW 2ND AVENUE
City-State-Zip:	BOCA RATON FL 33487

Title	D
Name	CHAFFEE, HAROLD
Address	6200 NW 2ND AVENUE 420
City-State-Zip:	BOCA RATON FL 33487

Title	P
Name	CHAFFEE, BARBARA
Address	6200 NW 2 AVE #420
City-State-Zip:	BOCA RATON FL 33487

Title	D
Name	MIKOVIC, LJILJANA
Address	6100 NW 2 AVE #224
City-State-Zip:	BOCA RATON FL 33487

Title	D
Name	GROSS, STEVEN
Address	6200 NW 2ND AVENUE 207
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: BARBARA CHAFFEE

P

04/15/2014

Electronic Signature of Signing Officer/Director Detail_____
Date