

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756044

Entity Name: BOCA TEECA CONDOMINIUM NO. 10, INC.**Current Principal Place of Business:**5240 NW 2ND AVENUE
BOCA RATON, FL 33487**Current Mailing Address:**5240 NW 2ND AVENUE
BOCA RATON, FL 33487 US**FEI Number:** 59-2261906**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BLACK, DAVID A
5240 NW 2ND AVE
BOCA RATON, FL 33487 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 SECRETARY
Name STORCH, JOAN
Address 5240 NW 2ND AVENUE
City-State-Zip: BOCA RATON FL 33487

Title VICE PRESIDENT
Name TRAINOR, ROBERT
Address 5240 NW 2ND AVENUE
City-State-Zip: BOCA RATON FL 33487

Title DIRECTOR
Name POLY, KAY
Address 5240 NW 2ND AVENUE
City-State-Zip: BOCA RATON FL 33487

Title PRESIDENT
Name FICHERA, MICHAEL
Address 5240 NW 2ND AVENUE
City-State-Zip: BOCA RATON FL 33487

Title TREASURER
Name NICOLOPULOS, ROSE
Address 5240 NW 2ND AVENUE
City-State-Zip: BOCA RATON FL 33487

Title DIRECTOR
Name WINFIELD, MARIANNE
Address 5240 NW 2ND AVENUE
City-State-Zip: BOCA RATON FL 33487

Title DIRECTOR
Name TOCCHIO, FRED
Address 5240 NW 2ND AVENUE
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: MICHAEL FICHERA**PRESIDENT****02/21/2019**

Electronic Signature of Signing Officer/Director Detail

Date