

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000064218

**Entity Name:** 2021 BOCA INC.

**Current Principal Place of Business:**

1001 EAST ATLANTIC AVENUE  
SUITE 202  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

1001 EAST ATLANTIC AVENUE  
SUITE 202  
DELRAY BEACH, FL 33483 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

CRITCHFIELD, RICHARD H  
1001 EAST ATLANTIC AVENUE  
SUITE 201  
DELRAY BEACH, FL 33483 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 P  
Name WALSH, MICHAEL  
Address 1001 EAST ATLANTIC AVENUE, SUITE  
202  
City-State-Zip: DELRAY BEACH FL 33483

Title VP  
Name WALSH, MARK  
Address 1001 EAST ATLANTIC AVENUE, SUITE  
202  
City-State-Zip: DELRAY BEACH FL 33483

Title VP  
Name WALSH, WILLIAM  
Address 1001 EAST ATLANTIC AVENUE, SUITE  
202  
City-State-Zip: DELRAY BEACH FL 33483

Title ST  
Name WALSH, PATRICK  
Address 1001 EAST ATLANTIC AVENUE, SUITE  
202  
City-State-Zip: DELRAY BEACH FL 33483

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** WILLIAM WALSH

VP

01/03/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date