

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M14000008706

**Entity Name:** CP BOCA PLAZA LLC**Current Principal Place of Business:**5355 TOWN CENTER ROAD., SUITE 102  
BOCA RATON, FL 33486**Current Mailing Address:**225 N.E. MIZNER BLVD.  
SUITE 200  
BOCA RATON, FL 33432 US**FEI Number:** 47-2525634**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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**Authorized Person(s) Detail :**

Title	MGR
Name	BOCA GLADES VENTURE LP
Address	225 N.E. MIZNER BLVD., SUITE 200
City-State-Zip:	BOCA RATON FL 33432

Title	VP
Name	OSBORNE, JOHN
Address	225 N.E. MIZNER BLVD. SUITE 200
City-State-Zip:	BOCA RATON FL 33432

Title	VP
Name	BIANCO, ANGELO J
Address	225 N.E. MIZNER BLVD. SUITE 200
City-State-Zip:	BOCA RATON FL 33432

Title	PRESIDENT
Name	CROCKER, THOMAS J
Address	225 N.E. MIZNER BLVD. SUITE 200
City-State-Zip:	BOCA RATON FL 33432

Title	VP
Name	AMARA, TODD J
Address	225 N.E. MIZNER BLVD. SUITE 200
City-State-Zip:	BOCA RATON FL 33432

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TODD AMARA

V

03/06/2018

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date