

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706101

FILED  
Feb 29, 2012  
Secretary of State

**Entity Name:** THE ROGERS HOUSE CONDOMINIUM INCORPORATED

**Current Principal Place of Business:**

850 N.E. SPANISH RIVER BLVD.  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

850 N.E. SPANISH RIVER BLVD.  
BOCA RATON, FL 33431

**New Mailing Address:**

FEI Number: 59-1089521

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KEITH F. BACKER AT BACKER LAW FIRM, P.A.  
400 S. DIXIE HWY  
SUITE 420  
BOCA RATON, FL 33432 US

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

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

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: WVOTOCEK, THOMAS  
Address: 850 NE SPANISH RIVER BLVD. #25  
City-St-Zip: BOCA RATON, FL 33431

Title: PD  
Name: PELISH, JAMES  
Address: 850 NE SPANISH RIVER BLVD #35  
City-St-Zip: BOCA RATON, FL 33431

Title: TD  
Name: STEWART, ROBERTA J  
Address: 850 NE SPANISH RIVER BLVD #12  
City-St-Zip: BOCA RATON, FL 33431

Title: M  
Name: HARRY, THELMA  
Address: 10 BRANDON ROAD  
City-St-Zip: MARLBORO, NJ 07746 US

Title: S  
Name: SUESS, MICHAELA L  
Address: 850 NE SPANISH RIVER BLVD #42  
City-St-Zip: BOCA RATON, FL 33431

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: MICHAELA SUESS

S

02/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date