

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716093

FILED
Jan 05, 2009
Secretary of State

Entity Name: BOCA TEECA CONDOMINIUM NO. 2, INC.

Current Principal Place of Business:

5401/5501 NW 2ND AVE.
BOCA RATON, FL 33487

New Principal Place of Business:

5401/5501 NW 2ND AVE.
125
BOCA RATON, FL 33487

Current Mailing Address:

5401/5501 NW 2ND AVE.
BOCA RATON, FL 33487

New Mailing Address:

5401/5501 NW 2ND AVE.
125
BOCA RATON, FL 33487

FEI Number: 59-1281957

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOFFO, DOLORES
5401 NW 2ND AVE #125
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

MOFFO, DOLORES M PRESIDE
5401 NW 2ND AVE #125
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: DOLORES M. MOFFO

01/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: DIFINI, JOSEPH
Address: 5501 NW 2ND AVE #307
City-St-Zip: BOCA RATON, FL 33487

Title: BMD () Delete
Name: DIFINI, MARIE
Address: 5501 NW 24ND AVE 307
City-St-Zip: BOCA RATON, FL 33487

Title: VPDS () Delete
Name: MOFFO MICHAEL H,
Address: 5401 NW 2ND AVE #125
City-St-Zip: BOCA RATON, FL

Title: PD () Delete
Name: MOFFO DOLORES,
Address: 5401 NW 2ND AVE #125
City-St-Zip: BOCA RATON, FL 00000,

Title: VPD () Delete
Name: DIGIVANNI, VINCENT
Address: 5401 NW 2ND AVE., #217
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: BMD (X) Change () Addition
Name: SOSH, SHAR
Address: 5401 NW 2ND AVE #321
City-St-Zip: BOCA RATON, FL 33487

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change () Addition
Name: MOFFO MICHAEL H,
Address: 5401 NW 2ND AVE #125
City-St-Zip: BOCA RATON, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DOLORES M. MOFFO

P

01/05/2009

Electronic Signature of Signing Officer or Director

Date