2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 717995

1. Entity Name

BOCA TEECA CONDOMINIUM NO. 3, INC.

FILED
Apr 03, 2000 8:00 am
Secretary of State
04-03-2000 90114 047 ****61.25

Principal Place of Business	Mailing Address
5500 NW 2ND AVENUE. 5TH FLOOR BOCA RATON FL 33487	5500 NW 2ND AVENUE. 5TH FLOOR BOCA RATON FL 33487-3898

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1313162 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LANDAU, GEORGE 5700 N.W. 2ND AVENUE #312 BOCA RATON FL 33487	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS O'DAY, NANCY 5500 NW 2ND AVENUE, #323 BOCA RATON, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHIFF, MARCIA 5500 NW 2ND AV #323 Boca Raton, FL 33487	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DEPHAMPHLIS, RICARDO 5500 NW 2ND AV #117 BOCA RATON FL 33487	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TREDEAU, DAVID 5700 NW 2ND AVENUE, #512 BOCA RATON, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SEAMAN, CHRISTINE 5700 NW 2ND AVE, #703 BOCA RATON, FL 33487	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT CARR, JAMES 5700 NW 2ND AVE #201 BOCA RATON, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P LANDAU, GEORGE 5700 NW 2ND AVE., #312 BOCA RATON FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED James H. Carr 2/21/00 561-994-0801
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #