

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2005 8:00 am
Secretary of State

04-14-2005 90111 025 ****61.25

DOCUMENT # 717995					
1. Entity Name BOCA TEECA CONDOMINIUM NO.-3, INC.					
Principal Place of Business 5500 NW 2ND AVENUE, 5TH FLOOR BOCA RATON, FL 33487			Mailing Address 5500 NW 2ND AVENUE, 5TH FLOOR BOCA RATON, FL 33487		
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	
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		
DAY, NANCY D 5500 N.W. 2ND AVENUE BOCA RATON, FL 33487			Name <u>Landau, George</u> Street Address (P.O. Box Number is Not Acceptable) <u>5500 NW 2nd Ave</u> <u>Boca Raton</u> City <u>FL</u> Zip Code <u>33487</u>		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>GEORGE LANDAU, PRES.</u> Signature, typed or printed name of registered agent and title if applicable.		<u>George Landau, Pres.</u> (NOTE: Registered Agent signature required when reissuing)		<u>04/07/05</u> DATE	
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution: ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE SD NAME O'DAY, NANCY STREET ADDRESS 5500 NW 2ND AVENUE, #323 CITY-ST-ZIP BOCA RATON, FL 33487	☒ Delete				
TITLE DIRECTOR NAME PAUL, RON STREET ADDRESS 5700 N.W. 2ND AVE., #509 CITY-ST-ZIP BOCA RATON, FL 33487	☐ Delete				
TITLE VPD NAME NAUGHTON, JIM STREET ADDRESS 5700 N.W. 2ND AVE #511 CITY-ST-ZIP BOCA RATON, FL 33487	☐ Delete				
TITLE DT NAME CARR, JAMES STREET ADDRESS 5700 NW 2ND AVE #201 CITY-ST-ZIP BOCA RATON, FL	☒ Delete				
TITLE T NAME COWLES, PATRICIA STREET ADDRESS 5500 N.W. 2ND AVE. #518 CITY-ST-ZIP BOCA RATON, FL 33487	☒ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE PRES. NAME GEORGE LANDAU STREET ADDRESS 5700 NW 2 AVE #312 CITY-ST-ZIP Boca Raton, FL 33487	☐ Change ☒ Addition				
TITLE TRES. NAME John GARGAN #504 STREET ADDRESS 5700 NW 2 AVE CITY-ST-ZIP Boca Raton, FL 33487	☐ Change ☒ Addition				
TITLE Secretary NAME mike Gibean STREET ADDRESS 5500 NW 2 Ave #317 CITY-ST-ZIP Boca Raton, FL 33487	☐ Change ☒ Addition				
TITLE Director NAME Ness Lebel STREET ADDRESS 5700 NW 2 Ave #601 CITY-ST-ZIP Boca Raton, FL 33487	☐ Change ☒ Addition				
TITLE Director NAME Case DeJong STREET ADDRESS 5500 NW 2 Ave #724 CITY-ST-ZIP Boca Raton, FL 33487	☐ Change ☒ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
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: <u>George Landau</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		<u>4/7/05</u> Date		<u>561 994-0801</u> Daytime Phone #	