## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1998

(7)

BOCA TEECA CONDOMINIUM NO. 9, INC.				
Principal Place of Business Mailing Address				a vonnet ennen neuen neuen nacht nacht einen nicht nacht neuen feine Arfelt felbte 1868
198 NORTHWEST 67TH STREET 198 NORTHWEST 67TH STRE BOCA RATON FL 33487 BOCA RATON FL 33487			EET	3. Date Incorporated or Qualified  02/19/1979  4. FEI Number  Applied For
2. Principal Place of Business 2a. Melling Address			59-1964872   Not Applicable  5. Certificate of Status Desired   \$8.75 Additional	
21		26		Fee Required
Suite, Apt. #, etc. Suite, Apt. #, etc. 27		Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & State		City & State		Trust Fund Contribution  Added to Fees  7. Is this nonprofit corporation a homeowners association?
23		28		Yes No
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	[25]		10	Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent  **CC: FR  B1 Name				10. Name and Address of New Registered Agent
TESLER			81 Name	
TESLEN, JEROME J 6500 NW 2ND AVE.			82 Street Addre	ess (P.O. Box Number is Not Acceptable)
BOCA RATON FL 33487			63	
DOOR II	M1011 FE 33407		84 City	■ 85 Zip Code
			' '	<b>₽-L</b>     `
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registrofice or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent. I am failular with, and accept the obligations of Section 617.0508, Elorida Statutes.  SIGNATURE  SIGNATURE				
	Signature, typed or printed name of projetered as		tenstered Agent signature required	
12.	OFFIC/LRS AF	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
TITLE NAME	TESLER, JEROME J	[] טבנבוב	1.1 TITLE 1.2 NAME	Change
STREET ADDRESS	6500 NW 2ND AVE.		1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP	
TITLE	VP	DELETE	2.1 TITLE	Change Addition
NAME	ZALEZNICK, HERMAN		2.2 NAME	
STREET ADDRESS	198 W 67TH ST.		2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL		2. 4 CITY-ST-ZIP	i
TITLE	Ť	☐ DELETE	3.1 TITLE	Change Addition
NAME	rosenbloom, Herbert		3.2 NAM€	i
STREET ADDRESS	198 NW 67 ST		3.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL		3.4. CITY-ST-ZIP	
TITLE	D	☐ DELETE	4.1 TITLE	Li Change Li Addition
NAME	LISBIN, SARA		4. 2 NAME	
STREET ADDRESS	198 NW 67TH ST.		4.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33487	☐ DELETE	4.4 CITY-ST-ZIP	Ohenn Classon
TITLE	D EDADNI CUIDIEV	L1 DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME CTRCCT ADDRESS	Fradin, Shirley 6400 NW 2ND AVE.		5.2 NAME	
STREET ADDRESS	BOCA RATON FL		5.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	D D	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	Change Addition
NAME	SLY, CHESTER		6.2 NAME	First Change First Worldon
STREET ADDRESS	6500 NW 2ND AVE		6.3 STREET ADDRESS	

14. Thereby 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 annual report or supplemental annual 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 12 or Block 13 if charges, or on an attachment with an address.

Mar 11 1998 8:00am

Secretary of State