

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750422

FILED  
Apr 26, 2006  
Secretary of State

Entity Name: BOCA RATON AREA COMMERCE POLITICAL ACTION COMMITTEE, INC.

**Current Principal Place of Business:**

1800 NORTH DIXIE HIGHWAY  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

1800 NORTH DIXIE HIGHWAY  
BOCA RATON, FL 33432

**New Mailing Address:**

FEI Number: 59-1974062      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

ARTS, M.J.  
1800 N. DIXIE HWY.  
BOCA RATON, FL 33432      US

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

MC LELLAN, TROY M  
1800 N. DIXIE HWY.  
BOCA RATON, FL 33432      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: TROY M. MCLELLAN

04/26/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CHMN ( ) Delete  
Name: TRAVASOS, AL  
Address: 1800 N DIXIE HWY  
City-St-Zip: BOCA RATON, FL 33432

Title: S/T ( ) Delete  
Name: ARTS, M. J.  
Address: 1800 N DIXIE HWY  
City-St-Zip: BOCA RATON, FL 33432

Title: DPTR ( ) Delete  
Name: BRANIGAN, MICHAEL  
Address: 1800 N DIXIE HWY  
City-St-Zip: BOCA RATON, FL 33432

Title: DPTR (X) Delete  
Name: MC LELLAN, TROY  
Address: 1800 N DIXIE HWY  
City-St-Zip: BOCA RATON, FL 33432

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: TRAVASOS, AL  
Address: 1800 N DIXIE HWY  
City-St-Zip: BOCA RATON, FL 33432

Title: VP (X) Change ( ) Addition  
Name: LYNCH, THOMAS E  
Address: 1800 N DIXIE HWY  
City-St-Zip: BOCA RATON, FL 33432

Title: S/T (X) Change ( ) Addition  
Name: MC LELLAN, TROY M  
Address: 1800 N DIXIE HWY  
City-St-Zip: BOCA RATON, FL 33432

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

I hereby certify that the information supplied with this filing does not qualify for the 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: TROY M. MCLELLAN

S/T

04/26/2006

Electronic Signature of Signing Officer or Director

Date