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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

> Secretary of State DIVISION OF CORPORATIONS

1996

N12390

(3)

DOCUMENT # BOCA TEECA COUNTRY CLUB, INC.

**FILED** Apr 17, 1996 08:00 AM **Secretary of State** 

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- 1 ( <b>111</b> ) (11   11		

Principal Place of	of Business	Mailing Address			Ì				
5800 NW 2ND AVE.		5800 NW 2ND AVE.							
BOCA RATON F		BOCA RATON FL 33487							
					3. Date Inco 12/0	proprated or Qualified 5/1985		te of Last F 14/19/19	
2. Principal Place of Business		2a. Mailing Address				4. FEI Number 59-2641578			polied For
21		26			39.2	104 1070			ot Applicable
Suite, Apt. #.	, etc.	Suite, Apt. #, etc.			5. Certificate	e of Status Desired		• -	Additional tequired
22		City & State			6 Floation (	Campaign Financing			) May Be
City & State		28				nd Contribution			to Fees
<b>23</b> Zip	Country	Zip	Coun	try		oration has liability for i	ntangible ta	x under s.	199.032,
24	25	29	30		Florida S	tatutes	🕽 Yes 🗌	No	
	9. Name and Address of Curre	ent Registered Agent			10. Name a	nd Address of New R	egistered /	Agent	
			1	81 Name					
MILES, AN	NNE			32 Street A	Address (P.Ö. Box N	umber is Not Acceptab	le)		
	/. 2ND AVENUE		L			<u> </u>			
BOCA RA	TON FL 33487		ļ	83					
			<u> </u>	B4 City				85 Zip	Code
							FL		asiatored offi
11. Pursuant to	o the provisions of Sections 617.050 ed agent, or both, in the State of Flo	02 and 617.1508, Florida Statut	es, the aboved by the co	re-named co orgonation's	prporation submits the hoard of directors. I	is statement for the pur hereby accept the app	pose or cha pintment as	registered registered	agent. Lam
or registere familiar with	ed agent, or both, in the State of Fic h, and accept the obligations of, Se	ection 617.0503, Florida Statutes	3.	siporoson s					
SIGNATURE							DATE		
SIGNATURE _	Signature, typed or printed name of registered ag	, , , , , , , , , , , , , , , , , , ,		Agent signature r	equired when reinstating	NS/CHANGES TO OFF	DATE	DIRECTO	RS IN 12
SIGNATURE _	OFFICERS A	AND DIRECTORS	13.		ADDITIO	NS/CHANGES TO OFF	ICERS AND		
SIGNATURE	OFFICERS A	, , , , , , , , , , , , , , , , , , ,	13. 1.1 T/I	LÉ	ADDITIO		ICERS AND	DIRECTO Change	
SIGNATURE 5 12. TITLE NAME	PD MURATORE, JOHN	AND DIRECTORS	13. 1.1 TIT 1.2 NA	LÊ ME	ADDITIO		ICERS AND		
SIGNATURE	PD MURATORE, JOHN 5800 NW 2ND AVNUE	AND DIRECTORS	13. 1.1 III 1.2 NA 1.3 STI	le Me Reet address	ADDITION FOR	INSOM DND ALLNUE	ICERS AND		
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	PD MURATORE, JOHN 5800 NW 2ND AVNUE BOCA RATON FL	ND DIRECTORS  TO DELETE	13. 1.1 III 1.2 NA 1.3 STI	LE ME REET ADDRESS Y-ST-ZIP	ADDITION FOR		ICERS AND		RS IN 12 Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY- ST-ZIP  TITLE	PD MURATORE, JOHN 5800 NW 2ND AVNUE BOCA RATON FL VPD	AND DIRECTORS	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT	LE ME REET ADDRESS Y-ST-ZIP LE	ADDITION ADDITION ADDITION ADDITION AND SECONDARY AND APPENDING ADDITION AD	INSON: AND ALLNUE IONO, [h. 33	ICERS AND	<b>X</b> Change	Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	PD MURATORE, JOHN 5800 NW 2ND AVNUE BOCA RATON FL VPD ROBINSON, ELLIS	ND DIRECTORS  TO DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA	LE ME REET ADDRESS Y-ST-ZIP LE ME	ADDITION  FD  ELLIS FOR  5800 ALW  BOLD FINI  VI'D  EDMOND C	INSON: AND ACINUE IDNO, [K. 335 HINCHILLO ONS AVENUE	ICERS AND	<b>X</b> Change	Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	PD MURATORE, JOHN 5800 NW 2ND AVNUE BOCA RATON FL VPD ROBINSON, ELLIS 5800 NW 2ND AVE.	ND DIRECTORS  TO DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST	LE ME ME Y-ST-ZIP LE ME ME	ADDITION  FD  ELLIS FOR  5800 ALW  BOLD FINI  VI'D  EDMOND C	INSON: AND ACINUE IDNO, [K. 335 HINCHILLO ONS AVENUE	ICERS AND	<b>∑</b> Change <b>∑</b> Change	Addition
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SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	PD MURATORE, JOHN 5800 NW 2ND AVNUE BOCA RATON FL VPD ROBINSON, ELLIS 5800 NW 2ND AVE. BOCA RATON FL VPD	IND DIRECTORS	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI	ME REET ADORESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE	ADDITION  FINE FOR  SECON KING  VI'D  EDMOND C  SEVO NIW  BOLD C'PT  MARTION	IMSOM: AND ACCINUE IDAS, F.L. 335 MINCHILLO DAS AVENUE DAS AVENUE DIAMOND	ICERS AND	<b>∑</b> Change <b>∑</b> Change	Addition
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SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	PD MURATORE, JOHN 5800 NW 2ND AVNUE BOCA RATON FL VPD ROBINSON, ELLIS 5800 NW 2ND AVE. BOCA RATON FL VPD CHINCHILLO, EDMOND 5800 NW 2ND AVE. BOCA RATON O	IND DIRECTORS  TO DELETE  TO DELETE	13. 1.1 TIT 12 NA 1.3 STI 1.4 CIT 21 TIT 22 NA 23 ST 2.4 CIT 32 NA 33 ST 34.C	LE ME ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP	ADDITION  FINE FOR  5800 NW  BOCK RM  VID  EDMOND C  5800 NW  BOCK PT  MARTON  5800 NW  BOCK FT	IMSON: AND ALL MUE IDNO, [L. 336  MINCHILLO DNS AVINUE IDN, [L 3448)  DIAMOND  AND AVINUE TO A IFL 33	187 187 187	XI Change  ☑ Change	Addition
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SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE	PD MURATORE, JOHN 5800 NW 2ND AVNUE BOCA RATON FL VPD ROBINSON, ELLIS 5800 NW 2ND AVE. BOCA RATON FL VPD CHINCHILLO, EDMOND 5800 NW 2ND AVE. BOCA RATON O SD DIAMOND, MARION 5800 NW 2ND AVENUE BOCA RATON FL TD KAUFMAN, EVERETT 5800 NW 2ND AVE.	IND DIRECTORS  INDELETE  INDELETE  INDELETE	13. 1.1 TIT 12 NA 1.3 STI 1.4 CIT 22 NA 2.3 ST 2.4 CIT 31 TIT 32 NA 33 STI 34 C 41 TIT 4.2 N 4.3 ST 4.4 CIT 51 TIT 52 NA	LE  ME  ME  ME  ME  ME  ME  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS	ADDITION  FD  EXTIS FOR  5800 NW  BOCK FRY  VID  EDMOND C  5800 NW  BOCK FA  SBOCK FA	MASOM: AND ACCINCE ONE, FL. 335  MINCHILLO DINS AVENUE ON, FL 33487  DIAMOND  TON FL. 33  MHEIM DING AVENUE OTEN, FL. 335  MINCHILLO DING AVENUE OTEN, FL. 335	ICERS AND	X Change  Change  Change  Change	Addition Addition Addition
12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD MURATORE, JOHN 5800 NW 2ND AVNUE BOCA RATON FL VPD ROBINSON, ELLIS 5800 NW 2ND AVE. BOCA RATON FL VPD CHINCHILLO, EDMOND 5800 NW 2ND AVE. BOCA RATON O SD DIAMOND, MARION 5800 NW 2ND AVENUE BOCA RATON FL TD KAUFMAN, EVERETT	IND DIRECTORS  INDELETE  INDELETE  INDELETE  INDELETE  INDELETE	13. 1.1 TIT 12 NA 1.3 STI 1.4 CIT 22 NA 23 ST 2.4 CIT 31 TIT 32 NA 33 STI 34 C 41 TIT 4.2 N 4.3 ST 4.4 CIT 51 TIT 52 NA 5.3 ST	LE ME ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE AME REET ADDRESS TY-ST-ZIP LE AME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS	ADDITION  FD  EXTIS FOR  5800 NW  BOCK FRY  VID  EDMOND C  5800 NW  BOCK FA  SBOCK FA	INSON: AND ACINUE IDNO, [h. 335 CHINCHILLO DAS AVENUE ON, [L 3448] DIAMOND CAND AVENUE TON [FL 33	ICERS AND	Change Change Change Change	Addition Addition Addition Addition
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SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	PD MURATORE, JOHN 5800 NW 2ND AVNUE BOCA RATON FL VPD ROBINSON, ELLIS 5800 NW 2ND AVE. BOCA RATON FL VPD CHINCHILLO, EDMOND 5800 NW 2ND AVE. BOCA RATON O SD DIAMOND, MARION 5800 NW 2ND AVENUE BOCA RATON FL TD KAUFMAN, EVERETT 5800 NW 2ND AVE.	IND DIRECTORS  INDELETE  INDELETE  INDELETE  INDELETE  INDELETE	13. 1.1 TIT 12 NA 1.3 STI 1.4 CIT 22 TIT 22 NA 23 ST 2.4 CIT 31 TIT 32 NA 33 STI 34 C 41 TIT 4.2 N 4.3 ST 4.4 CI 51 TI 52 N/ 5.3 S' 5.4 CI 61 TI 62 N	LE  ME REET ADDRESS Y-ST-ZIP LE  ME REET ADDRESS IY-ST-ZIP LE  ME REET ADDRESS IY-ST-ZIP LE  AME REET ADDRESS IY-ST-ZIP LE  ME REET ADDRESS IY-ST-ZIP LE  ME REET ADDRESS IY-ST-ZIP LE REET ADDRESS	ADDITION  FD  EXTIS FOR  5800 NW  BOCK FRY  VID  EDMOND C  5800 NW  BOCK FA  SBOCK FA	MASOM: AND ACCINCE ONE, FL. 335  MINCHILLO DINS AVENUE ON, FL 33487  DIAMOND  TON FL. 33  MHEIM DING AVENUE OTEN, FL. 335  MINCHILLO DING AVENUE OTEN, FL. 335	ICERS AND	Change Change Change Change	Addition Addition Addition

Too hereby certify that the information supplied with this limit is voluntarily furnished and does not qualify to the exemption stated in Section 1.9.07(a)(i), holded stated 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 changed, or on an attachment with an address.

SIGNATURE: \_

July Congress Constitute AND THE POW 2 May 1/3/96 (407) 994-0400 Destine Prone is