FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Mar 18 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

1. Corporation	MENT # N12390	0 (3)				
BOCA 1	TEECA COUNTRY CLUB, IN	IC.				
Principal Place of Business		Mailing Address			# 1 88 111181	
5800 NW 2ND AVE. BOCA RATON FL 33487		5800 NW 2ND AVE. BOCA RATON FL 33487-3830				
					3. Date Incorporated or Qualified	3a. Date of Last Report 04/17/1996
2 Principal Pl	ace of Business	2a. Mailing Address			12/05/1985 4. FEI Number	Applied For
21		26			59-2641578	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Additional
City & State		City & State		-		Fee Required
23		28			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for in	
24	25		30		1	Yes No
	9, Name and Address of Current	Registered Agent	81 Nan		10. Name and Address of New Reg	listered Agent
MILES, ANNE					70 C D 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	W. 2ND AVENUE		82 Stre	et Addre	ss (P.O. Box Number is Not Acceptabl	0)
BOCA RATON FL 33487			83			
			84 City			85 Zip Code
11. Pursuant t	to the provisions of Sections 617 0502	2 and 617 1508. Horida Statut	es the above-name	ed corne	ration submits this statement for the or	urpose of changing its registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obligation	of Florida, Such change was a	authorized by the c orida Statutes	orporatio	ration submits this statement for the pun's board of directors. I hereby accep	I the appointment as registered
SIGNATURE	The transfer that the transfer the bisinger		nica diatatea.			
	Signature, lyped or printed name of registered ages		Hegistered Agent signs	ure required		DAIL
12.	OFFICERS AND	DELETIE DELETIE	13. 1.1 101E		ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	ROBINSON, ELLIS		1.2 NAMI			C change C women
STREET ADDRESS	5800 NW 2ND AVENUE		1.3 STREET ADDRES	s		
CITY+ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP			
TITLE	VPD	[_] DEFFE	2.1 TITLE			Change Addition
NAME	CHINCHILLO, EDMOND		2.2 NAME			
STREET ADDRESS	5800 NW 2ND AVE. BOCA RATON FL		2.3 STREET ADDRES	S		
CITY-\$T-ZIP TITLE	VPD	DELETE	2. 4 CHY- S1- 7IP 3.1 TOLE			Change Addition
NAME	DIAMOND, MARION		3.2 NAME			- • -
STREET ADDRESS	5800 NW 2ND AVENUE		3.3 STREET ADDRES	s		
CITY-ST-ZIP	BOCA RATON Q		3.4 CITY-ST-ZIP			
TITLE	SD	E DELETE	4.1 10 LE			Change Addition
NAME	ARNHEIM, CEIL		4. 2 NAME			
STREET ADDRESS	5800 NW 2ND AVENUE BOCA RATON FL		4.3 STREET ADDRES	s		
CITY - ST - ZIP	TD	DELETE	4.4 CITY - S1 - ZIP 5.1 TITLE	+		Change Addition
NAME	PONZIANI, JOHN	•—	5.2 NAME			
STREET ADDRESS	5800 NW 2ND AVE.		5.3 STREET ADDRES	s		
CITY-ST-ZIP	BOCA RATON FL		5.4 C(1 Y - S1 - Z(F)			
TITLE		☐ DELETE	6.1 THLE			☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRES	S		
CITY-ST-ZIP	by cerbly that the information supplied	t with this filing does not qualit	6.4 C(1Y - S1 - Z(P) fy for the exemption	l stated	n Section 119.07(3)(i), Florida Statutes	s. I further certify that the
informatio I am an of	n indicated on this annual report or s	upplemental annual report is t the receiver or trustee empow	rue and accurate a rered to execute th	nd that r	ny signature shall have the same legal as required by Chapter 617, Florida S	effect as if made under oath; that