2007 FOR PROFIT CORPORATION ANNUAL REPORT

6. Name and Address of Current Registered Agent

DOCUMENT # P02000110234

1. Entity Name

BOCA PIER ASSOCIATES, INC.



Principal Place of Business

7777 GLADES ROAD

SUITE 310 BOCA RATON, FL 33434 Mailing Address

7777 GLADES ROAD SUITE 310

BOCA RATON, FL 33434

FILED Apr 26, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

with all other like empowered.

Robert J. Schmier, Pres.

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

 01042007
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number 37-1445079
 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytme Phone #

SCHMIER, ROBERT J 7777 GLADES ROAD SUITE 310 BOCA RATON, FL 33434

 I hereby certify that the indicated on this report of the corporation or the changed, or on an atte

SIGNATURE

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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.					
	Signature, typed or printed name of registered agent and title	if applicable (NOTE: Registered /	gent signatur	e required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.	ing 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHMIER, ROBERT J 7777 GLADES ROAD SUITE 310 BOCA RATON, FL 33434				U00000734875
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FEURRING, DOUGLAS R 7777 GLADES ROAD SUITE 310 BOCA RATON, FL 33434				05/10/07-80011-009 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET AODRESS CITY-ST-ZIP				IN ⁻	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					

riformation supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information or supplemental reports true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director receiver or trustee impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

APR 2 4 2007