2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000090930

1. Entity Name
THE BOCA GROUP & ASSOCIATES, INC.

Principal Place of Business	Mailing Address
10864 LA SALINAS CIR BOCA RATON, FL 33428	10864 LA SALINAS CIR BOCA RATON, FL 33428

DO NOT WRITE IN THIS SPACE

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02222005   No Chg-P   CR2E034 (10/03)

4. FEI Number 56-2401450	Applied For
	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

REDL, DONALD P JR.
10864 LA SALINAS CIR
BOCA RATON, FL 33428

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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 Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	REDL, DONALD P JR.
STREET ADDRESS	10864 LA SALINAS CIR
CITY-ST-ZIP	BOCA RATON, FL 33428

TITLE	
NAME	
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CITY-ST-ZIP	

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12. I hereby 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____   04-18-2005   954-315-3998

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #