

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000088310

FILED
Jan 06, 2009
Secretary of State

Entity Name: THE BOCA FIVE, INC.

Current Principal Place of Business:

170 WEST DEARBORN STREET
ENGLEWOOD, FL 34223

New Principal Place of Business:

Current Mailing Address:

170 WEST DEARBORN STREET
ENGLEWOOD, FL 34223

New Mailing Address:

FEI Number: 35-2349005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVID A. DUNKIN, P.A.
170 WEST DEARBORN STREET
ENGLEWOOD, FL 34223 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DE SANTIS, DON R
Address: 22 BOCA ROYALE BLVD
City-St-Zip: ENGLEWOOD, FL 34223

Title: STD () Delete
Name: DUNKIN, DAVID A
Address: 170 WEST DEARBORN STREET
City-St-Zip: ENGLEWOOD, FL 34223

Title: D () Delete
Name: HANS, HAROLD L
Address: 19 CAYMAN ISLES BLVD.
City-St-Zip: ENGLEWOOD, FL 34223

Title: D () Delete
Name: TOWERS, JOHN R
Address: 21 CARISA ROYALE CT.
City-St-Zip: ENGLEWOOD, FL 34223

Title: D () Delete
Name: COMEAU, SUSAN
Address: 17 CAYMAN ISLES BLVD
City-St-Zip: ENGLEWOOD, FL 34223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID A. DUNKIN

STD

01/06/2009

Electronic Signature of Signing Officer or Director

Date