

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000039025 (8)**

1. Corporation Name

BOCA VENTURES, INC.



Principal Place of Business

**601 S LAKE DESTINY RD
SUITE 200
MAITLAND FL 32751**

Mailing Address

**601 S LAKE DESTINY RD
SUITE 200
MAITLAND FL 32751**

3. Date Incorporated or Qualified

05/11/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

25. Country

28. Zip

30. Country

4. FEI Number

65-0580580

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**TATICH, PHILIP
601 S LAKE DESTINY RD
SUITE 200
MAITLAND FL 32751**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person submitting this report (print name and title)

Signature of Registered Agent (print name and title)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ DELETE

NAME: **PD
Neubauer, Charles L.**
STREET ADDRESS: **45 Almedra Avenue**
CITY, ST, ZIP: **Atherton, CA 94025**

1.2 TITLE ☐ DELETE

NAME: **V
Tatich, Philip**
STREET ADDRESS: **901 Golfview Terrace**
CITY, ST, ZIP: **Winter Park, FL 32789**
TITLE: **SD**

1.3 TITLE ☐ DELETE

NAME: **Neubauer, David M.**
STREET ADDRESS: **57 N. Gate**
CITY, ST, ZIP: **Atherton, CA 94027**

1.4 TITLE ☐ DELETE

NAME:
STREET ADDRESS:
CITY, ST, ZIP:

1.5 TITLE ☐ DELETE

NAME:
STREET ADDRESS:
CITY, ST, ZIP:

1.6 TITLE ☐ DELETE

NAME:
STREET ADDRESS:
CITY, ST, ZIP:

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME:
2.3 STREET ADDRESS:
2.4 CITY, ST, ZIP:

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME:
3.3 STREET ADDRESS:
3.4 CITY, ST, ZIP:

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME:
4.3 STREET ADDRESS:
4.4 CITY, ST, ZIP:

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME:
5.3 STREET ADDRESS:
5.4 CITY, ST, ZIP:

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME:
6.3 STREET ADDRESS:
6.4 CITY, ST, ZIP:

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID Michael Neubauer 1/2/96 407-875-0033

CR2E034 (12/95)