

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000052326

FILED
Apr 30, 2009
Secretary of State

Entity Name: BOCA PARTNERS HOLDINGS CORP.

Current Principal Place of Business:

1600 SAWGRASS CORP PKWY
SUITE 230
SUNRISE, FL 33323

New Principal Place of Business:

1600 SAWGRASS CORP PKWY
SUITE 400
SUNRISE, FL 33323

Current Mailing Address:

1600 SAWGRASS CORP PKWY
SUITE 230
SUNRISE, FL 33323

New Mailing Address:

1600 SAWGRASS CORP PKWY
SUITE 400
SUNRISE, FL 33323

FEI Number: 65-0679063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HELFMAN, STEVEN M ESQ
1600 SAWGRASS CORPORATE PARKWAY, SUITE 300
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

HELFMAN, STEVEN M ESQ
1600 SAWGRASS CORPORATE PARKWAY
SUITE 400
SUNRISE, FL 33323 US

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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: EZRALTI, MISHA
Address: 1600 SAWGRASS CORP PKWY, SUITE 230
City-St-Zip: SUNRISE, FL 33323

Title: VST () Delete
Name: CORBAN, PAUL
Address: 1600 SAWGRASS CORP PKWY, SUITE 230
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: EZRATTI, MISHA
Address: 1600 SAWGRASS CORP PKWY, SUITE 400
City-St-Zip: SUNRISE, FL 33323

Title: VST (X) Change () Addition
Name: CORBAN, PAUL
Address: 1600 SAWGRASS CORP PKWY, SUITE 400
City-St-Zip: SUNRISE, FL 33323

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: MISHA EZRATTI

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04/30/2009

Electronic Signature of Signing Officer or Director

Date