

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P98000023960

1. Entity Name  
BOCA LAND HOLDINGS, INC.



Principal Place of Business  
321 E HILLSBORO BLVD

Mailing Address  
321 E HILLSBORO BLVD  
DEERFIELD BEACH, FL 33441

**FILED  
May 01, 2007 8:00 am  
Secretary of State**

05-01-2007 90019 040 \*\*\*158.75



02012007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1013842	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

STOTZER, TED  
321 E HILLSBORO BLVD  
DEERFIELD BEACH, FL 33441

**DO NOT WRITE  
IN THIS SPACE**

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, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE P  
NAME STREET, BRIAN  
STREET ADDRESS 321 E HILLSBORO BLVD  
CITY-ST-ZIP DEERFIELD BEACH, FL 33441

TITLE VP  
NAME COHEN, JAMES  
STREET ADDRESS 321 E HILLSBORO BLVD  
CITY-ST-ZIP DEERFIELD BEACH, FL 33441

TITLE S  
NAME MCCGRAW, MICHAEL L  
STREET ADDRESS 321 E HILLSBORO BLVD  
CITY-ST-ZIP DEERFIELD BEACH, FL 33441

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** James R. Cohen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
James R. Cohen, Vice President

March 8, 2007 (954) 949-3480

Date

Daytime Phone #