2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717995

Entity Name: BOCA TEECA CONDOMINIUM NO. 3, INC.

FILED
May 15, 2020
Secretary of State
4829529663CC

Current Principal Place of Business:

C/O ASSOCIATION SPECIALTY GROUP LLC 5500 & 5700 NW 2ND AVE BOCA RATON, FL 33487

Current Mailing Address:

C/O ASSOCIATION SPECIALTY GROUP LLC P O BOX 803555 DALLAS, TX 75380 US

FEI Number: 59-1313162 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEVENS & GOLDWYN, P.A. C/O STEVENS & GOLDWYN, P.A. 2 SOUTH UNIVERSITY DRIVE SUITE 329 PLANTATION, FL 33324 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: STEVENS & GOLDWYN 05/15/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

TitlePRESIDENTTitleVICE PRESIDENTNameLANDAU, KENNETHNameLINDER, GLIBERT

Address C/O ASSOCIATION SPECIALTY Address C/O ASSOCIATION SPECIALTY

GROUP LLC GROUP LLC

9050 PINES BLVD. STE. 480 9050 PINES BLVD. STE. 480

City-State-Zip: PEMBROKE PINES FL 33024 City-State-Zip: PEMBROKE PINES FL 33024

Title TREASURER Title DIRECTOR

Name KASPRZAK, JOSEPH JR.

Address C/O ASSOCIATION SPECIALTY Address C/O ASSOCIATION SPECIALTY

GROUP LLC GROUP LLC

9050 PINES BLVD. STE. 480 9050 PINES BLVD. STE. 480

City-State-Zip: PEMBROKE PINES FL 33024 City-State-Zip: PEMBROKE PINES FL 33024

Title SECRETARY Title DIRECTOR

Name LANDAU, FLORENCE Name SWIDERSKI, IRENA

Address C/O ASSOCIATION SPECIALTY Address C/O ASSOCIATION SPECIALTY

GROUP LLC GROUP

9050 PINES BLVD. STE. 480 9050 PINES BLVD SUITE 480

City-State-Zip: PEMBROKE PINES FL 33024 City-State-Zip: PEMBROKE PINES FL 33024

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.