## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000002075

FILED Apr 25, 2007 Secretary of State

Entity Name: SONESTA WALK HOMEOWNERS ASSOCIATION OF BREVARD COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

6767 N. WICKHAM ROAD, SUITE 500 6905N. WICKHAM ROAD

MELBOURNE, FL 32940 SUITE 401

MELBOURNE, FL 32940 US

Current Mailing Address: New Mailing Address:

1978 ROCKLEDGE BLVD SUITE 106 ROCKLEDGE, FL 32955

FEI Number: 20-0865301 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HARKNESS, KAREN BURKE, BARBARA A

6767 N. WICKHAM ROAD, SUITE 500 1200 SOUTH PINE ISLAND ROAD MELBOURNE, FL 32940 US 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: BARBARA A BURKE 04/25/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 BARIN, DAVID
 Name:
 BARIN, DAVID

 Address:
 6767 N. WICKHAM ROAD, SUITE 500
 Address:
 6905 N. WICKHAM ROAD, SUITE 401

 City-St-Zip:
 MELBOURNE, FL 32940
 City-St-Zip:
 MELBOURNE, FL 32940

Title: VTD ( ) Delete Title: VD (X) Change ( ) Addition

Name: WALKER, LISA Name: MITCHELL, KENNETH R
Address: 6767 N. WICKHAM ROAD. SUITE 500 Address: 6905 N. WICKHAM ROAD. SUITE 401

City-St-Zip: MELBOURNE, FL 32955 City-St-Zip: MELBOURNE, FL 32940

Title: SD ( ) Delete Title: SD (X) Change ( ) Addition Name: CURLES, TOM Name: CURLES, TOM

Address: 6767 N. WICKHAM ROAD, SUITE 500 Address: 6905 N. WICKHAM ROAD, SUITE 401

City-St-Zip: MELBOURNE, FL 32955 City-St-Zip: MELBOURNE, FL 32940

Title: ( ) Delete Title: TD ( ) Change (X) Addition

 Name:
 Name:
 O'TOOLE, HAZEL

 Address:
 Address:
 6905 N. WICKHAM ROAD, SUITE 401

City-St-Zip: City-St-Zip: MELBOURNE, FL 32940

Title: D ( ) Change (X) Addition

Name: Name: REMSON, NANCY

Address: Address: 870 LUMINARY CIRCLE #104 City-St-Zip: City-St-Zip: MELBOURNE, FL 32901

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

SIGNATURE: HAZEL O'TOOLE TD 04/25/2007