

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 769535

**Entity Name:** BOCA WALK HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Mar 21, 2016**  
**Secretary of State**  
**CC2401481741**

**Current Principal Place of Business:**

C/O SUPERIOR ASSOCIATION MANAGEMENT  
20283 STATE ROAD 7 SUITE 219  
BOCA RATON, FL 33498

**Current Mailing Address:**

SUPERIOR ASSOCIATION MANAGEMENT  
20283 STATE ROAD 7 SUITE 219  
BOCA RATON, FL 33498 US

**FEI Number: 59-2378201**

**Certificate of Status Desired: No**

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

WHARTON, SANDRA  
6379 BOCA CIRCLE  
BOCA RATON, FL 33433 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name WHARTON, SANDRA  
Address 6379 BOCA CIRCLE  
City-State-Zip: BOCA RATON FL 33433

Title P  
Name HOLLAND, ROBERT  
Address 6304 WALK CIRCLE  
City-State-Zip: BOCA RATON FL 33433

Title TREASURER  
Name ROBLES, ELIZABETH  
Address 6360 WALK CIRCLE  
City-State-Zip: BOCA RATON FL 33433

Title DIRECTOR  
Name PURDIE, ELIZABETH  
Address 6335 WALK CIRCLE  
City-State-Zip: BOCA RATON FL 33433

Title SECRETARY  
Name NEPI, MATTIA  
Address 6449 BOCA CIRCLE  
City-State-Zip: BOCA RATON FL 33433

*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.*

**SIGNATURE: ROBERT HOLLAND**

**PRESIDENT**

**03/21/2016**

Electronic Signature of Signing Officer/Director Detail

Date