2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00733

Entity Name: WALTON COURT PROPERTY OWNERS' ASSOCIATION, INC.

FILED Apr 09, 2017 Secretary of State CC6440577174

Current Principal Place of Business:

2261 SE BRASHFORD ST PORT ST. LUCIE. FL 34952

Current Mailing Address:

2261 S E BRASHFORD ST PORT ST. LUCIE, FL 34952 US

FEI Number: 59-2458196 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JAY STEVEN LEVINE P.A. 2500 N. MILITARY TRL., STE 490 BOCA RATON, FL 33431 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 DIRECTOR Title TREASURER

Name BRENNAN, CLAIRE Name POHL, BARBARA

Address 2320 BRECKENRIDGE CIR Address 2396 BRECKENRIDGE CIR.

City-State-Zip: PORT SAINT LUCIE FL 34952 City-State-Zip: PORT SAINT LUCIE FL 34952

Title VP Title PRESIDENT

Name ANDERSON, DOUGLAS Name EISENBERG, FERN

Address 1312 REMINGTON COURT Address 2387 SE BRECKENRIDGE CIRCLE

City-State-Zip: PORT SAINT LUCIE FL 34952 City-State-Zip: PORT ST LUCIE FL 34952

Title DIRECTOR Title SECRETARY

Name BAIN, RAYMOND Name LUCCHESE, GRACE

Address 2385 SE BRECKENRIDGE CIRCLE Address 2331 S.E. BRECKENRIDGE CIRCLE

City-State-Zip: PORT ST LUCIE FL 34952 City-State-Zip: PORT ST. LUCIE FL 34952

Title DIRECTOR

Name GLASER, RACHEL

Address 2392 SE BRECKENRIDGE CIRCLE

City-State-Zip: PORT ST. LUCIE FL 34952

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: BARBARA POHL TREASURER 04/09/2017

Electronic Signature of Signing Officer/Director Detail

Date