

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00733

FILED
Jan 22, 2018
Secretary of State
CC4180317324

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

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
Name BRENNAN, CLAIRE
Address 2320 BRECKENRIDGE CIR
City-State-Zip: PORT SAINT LUCIE FL 34952

Title TREASURER
Name POHL, BARBARA
Address 2396 BRECKENRIDGE CIR.
City-State-Zip: PORT SAINT LUCIE FL 34952

Title VP
Name ANDERSON, DOUGLAS
Address 1312 REMINGTON COURT
City-State-Zip: PORT SAINT LUCIE FL 34952

Title PRESIDENT
Name EISENBERG, FERN
Address 2387 SE BRECKENRIDGE CIRCLE
City-State-Zip: PORT ST LUCIE FL 34952

Title DIRECTOR
Name BAIN, RAYMOND
Address 2385 SE BRECKENRIDGE CIRCLE
City-State-Zip: PORT ST LUCIE FL 34952

Title SECRETARY
Name LUCCHESI, GRACE
Address 2331 S.E. BRECKENRIDGE CIRCLE
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

BOD/CAM

01/22/2018

Electronic Signature of Signing Officer/Director Detail

Date