

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000002478

**Entity Name:** ISLAND WALK HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**6155 TOWNCENTER CIR.  
STE. 101  
NAPLES, FL 34119**Current Mailing Address:**C/O KW PROPERTY MANAGEMENT & CONSULTING  
6155 TOWNCENTER CIRCLE SUITE 101  
NAPLES, FL 34119 US**FEI Number:** 65-0835277**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**GOEDE ADAMCZYK DEBOEST & CROSS  
6609 WILLOWPARK DRIVE  
201  
NAPLES, FL 34109 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:** BILLIE JEAN ZIPMAN

03/29/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name EHLERS, MICHAEL  
Address 6155 TOWNCENTER CIR.  
STE. 101  
City-State-Zip: NAPLES FL 34119

Title DIRECTOR  
Name GIBSON-LAEMEL, REBECCA  
Address 6155 TOWNCENTER CIR.  
STE. 101  
City-State-Zip: NAPLES FL 34119

Title DIRECTOR  
Name RAFFERTY, DENISE  
Address 6155 TOWNCENTER CIR.  
STE. 101  
City-State-Zip: NAPLES FL 34119

Title PRESIDENT  
Name STAKELUM III, PIERCY  
Address 6155 TOWNCENTER CIR.  
STE. 101  
City-State-Zip: NAPLES FL 34119

Title 2ND VICE PRESIDENT  
Name PAULSON, KRISTIN  
Address 6155 TOWNCENTER CIR.  
STE. 101  
City-State-Zip: NAPLES FL 34119

Title 1ST VICE-PRESIDENT  
Name DAVIS, ELIZABETH  
Address 6155 TOWNCENTER CIR.  
STE. 101  
City-State-Zip: NAPLES FL 34119

Title DIRECTOR  
Name ECONOMOS, AUDREY  
Address 6155 TOWNCENTER CIR.  
STE. 101  
City-State-Zip: NAPLES FL 34119

Title TREASURER  
Name MATHEWS, V THOMAS  
Address 6155 TOWNCENTER CIR.  
STE. 101  
City-State-Zip: NAPLES FL 34119

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*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:** PIERCY STAKELUM III

PRESIDENT

03/29/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                   DIRECTOR  
Name                 TARDIO, KENNETH  
Address             6155 TOWNCENTER CIR.  
                          STE. 101  
City-State-Zip:    NAPLES FL 34119

Title                   DIRECTOR  
Name                 ALAN, STRIEBEL  
Address             6155 TOWNCENTER CIR.  
                          STE. 101  
City-State-Zip:    NAPLES FL 34119