

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730519

FILED
Jun 26, 2009
Secretary of State

Entity Name: THE ADMIRAL'S WALK, INC.

Current Principal Place of Business:

4545 NORTH OCEAN BLVD
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

4545 NORTH OCEAN BLVD
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 59-1556727 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

POLIAKOFF, GARY A
BECKER & POLIAKOFF, P.A.
3111 STIRLING ROAD
FT LAUDERDALE, FL 333126525 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARZEC, GERALD
Address: 4545 NORTH OCEAN BLVD. PH-D
City-St-Zip: BOCA RATON, FL 33431

Title: DIR () Delete
Name: GOLDEN, KENNETH
Address: 4545 N OCEAN BLVD 6-C
City-St-Zip: BOCA RATON, FL 33431

Title: VP () Delete
Name: ZUCKER, SALLY
Address: 4545 N OCEAN BLVD 15-B
City-St-Zip: BOCA RATON, FL 33431

Title: S () Delete
Name: LIEBERMAN, STEPHEN
Address: 4545 N. OCEAN BLVD.
City-St-Zip: BOCA RATON, FL 33431

Title: TR (X) Delete
Name: MCGILLIEWADY, JOHN
Address: 4545 N. OCEAN BLVD.
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TR (X) Change () Addition
Name: MCGILLICUDDY, JOHN
Address: 4545 N. OCEAN BLVD.
City-St-Zip: BOCA RATON, FL 33431

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GERALD MARZEC

P

06/26/2009

Electronic Signature of Signing Officer or Director

Date