

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735560

FILED  
Jan 11, 2011  
Secretary of State

**Entity Name:** WALKER'S ISLE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

872 LILAC DR.  
BOCA RATON, FL 33487 US

**New Principal Place of Business:**

**Current Mailing Address:**

872 LILAC DR.  
BOCA RATON, FL 33487 US

**New Mailing Address:**

**FEI Number:** 59-2764675      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WILLIAMS, SANDRA  
872 LILAC DR  
BOCA RATON, FL 33487 US

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

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: TD  
Name: SANDRA WILLIAMS  
Address: 872 LILAC DR.  
City-St-Zip: BOCA RATON, FL 33487

Title: D  
Name: FOREMAN, JAY  
Address: 898 LILAC DR  
City-St-Zip: BOCA RATON, FL 33487

Title: S  
Name: ANTON, SUZANNE  
Address: 866 LILAC DR  
City-St-Zip: BOCA RATON, FL 33487

Title: PD  
Name: ANTON, FRED  
Address: 866 LILAC DR.  
City-St-Zip: BOCA RATON, FL 33487

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: SANDRA WILLIAMS

TD

01/11/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date