

FILE NOW: FILING FEE IS \$61.25

**NONPROFIT CORPORATION ANNUAL REPORT 1999**

FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS



DOCUMENT # 736298

1. Corporation Name  
OCEAN WALK PLACE HOMEOWNERS ASSOCIATION INC.

Principal Place of Business  
275 TONEY PENNA DR.  
STE #7  
JUPITER FL. 33458  
US

Mailing Address  
275 TONEY PENNA DR.  
STE #7  
JUPITER FL 33458  
US

2. Principal Place of Business  
21 275 TONEY PENNA DR.  
Suite, Apt. #, etc.  
22 SUITE #7  
City & State  
23 JUPITER FL.  
Zip Country  
24 33477 25 PALM BEACH 29 30

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip Country  
29 30

3. Date Incorporated or Qualified  
07/06/1976  
4. FEI Number  
59-2262568  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

THE SUNRISE MANAGEMENT COMPANY  
OF THE PALM BEACHES  
275 TONEY PENNA DRIVE  
STE 7  
JUPITER FL. 33458

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83 City  
84 City  
85 Zip Code  
FL

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE  
Signature, typed or printed name of registered agent and title if applicable

CRIG B Kunkle President  
(NOTE: Registered Agent signature required when reappointing)

DATE  
4/26/99

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
	PO	STOLLER ARDELL	109 E. TARPON LANE	
	SD	FRANKE PATRICIA	111 CORAL FISH LANE	
	TD	DOWNNEY PETER	108 SPEARFISH LANE	
	VD	BOORSE MARY JANE	125 E. SANDPIPER CIRCLE	
	D	KAHN GARY	105 W. SANDPIPER CIRCLE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY-ST-ZIP	31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-ST-ZIP	41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY-ST-ZIP	51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY-ST-ZIP	61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY-ST-ZIP

REINSTATEMENT 98-99

B 5/4/99 99AR

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037 (11/98)