

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768347

FILED
Feb 19, 2009
Secretary of State

Entity Name: WALKER COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

3432 W 45TH ST
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

3432 W 45TH ST
WEST PALM BEACH, FL 33407 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLANIGAN, JOHN F.
625 NORTH FLAGLER DRIVE, 9TH FLOOR
WEST PALM BEACH, FL 33401 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: EDP () Delete
Name: ZALMAN, JOSEPH
Address: 3432 WEST 45TH ST
City-St-Zip: WEST PALM BEACH, FL 33407

Title: VTD () Delete
Name: MURPHY, LARRY,
Address: 3432 WEST 45TH ST
City-St-Zip: WEST PALM BEACH, FL 33407

Title: S () Delete
Name: ZALMAN, JOSPEH
Address: 3432 W 45TH ST
City-St-Zip: WEST PALM BEACH, FL 33407

Title: S (X) Delete
Name: REEVES, LORETTA
Address: 3432 WEST 45TH STREET
City-St-Zip: WEST PALM BEACH, FL 33407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ZALMAN, JOE
Address: 3432 WEST 45TH ST
City-St-Zip: WEST PALM BEACH, FL 33407

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

Title: S (X) Change () Addition
Name: REEVES, LORETTA
Address: 3432 W 45TH ST
City-St-Zip: WEST PALM BEACH, FL 33407

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: JOE ZALMAN

PD

02/19/2009

Electronic Signature of Signing Officer or Director

Date