


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # 769412 1. Entity Name SEA WALK, INC.	
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Principal Place of Business % THOMAS R. BROWN 2660 AIRPORT ROAD SOUTH NAPLES, FL 34112	Mailing Address % THOMAS R. BROWN 2660 AIRPORT ROAD SOUTH NAPLES, FL 34112
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DO NOT WRITE IN THIS SPACE



01102006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-2408400	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

BROWN, THOMAS R.
2660 AIRPORT ROAD SOUTH
NAPLES, FL 34112

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BROWN, THOMAS R. 2660 AIRPORT ROAD SOUTH NAPLES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GILMOUR, JOAN 361 3RD AVENUE SOUTH NAPLES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD VEGA, GEORGE J 2660 AIRPORT ROAD SOUTH NAPLES, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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U00000333494
02/01/06-80014-015 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Thomas R. Brown Thomas R. Brown 1/19/06 (239) 774 9339

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #