2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769535

Apr 01, 2009 Secretary of State

Entity Name: BOCA WALK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O PRIME MANAGEMENT 6300 PARK OF COMMERCE BVLD BOCA RATON, FL 33487

Current Mailing Address: New Mailing Address:

C/O PRIME MANAGEMENT 6300 PARK OF COMMERCE BVLD BOCA RATON, FL 33487

FEI Number: 59-2378201 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WHARTON, SANDRA 6379 BOCA CIRCLE BOCA RATON, FL 33433 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete PURDIE, ELIZABETH SCHNACKENBERG, PAULA Name: Name: 6335 WALK CIRCLE Address: 6334 WALK CIRCLE Address: BOCA RATON, FL 33433 City-St-Zip: BOCA RATON, FL 33433 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

WHARTON, SANDRA WHARTON, SANDRA Name: Name: Address: 6379 BOCA CIRCLE Address: 6379 BOCA CIRCLE City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: BOCA RATON, FL 33433

Title: () Delete Title: () Change () Addition

HARDING, MARVIN Name: Name: Address: 6471 BOCA CIRCLE Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip:

Title: Title: (X) Change () Addition () Delete

Name: SCHNACKENBERG, PAULA Name: HOLLAND, ROBERT 6304 WALK CIRCLE Address: 6334 WALK CIRCLE Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: BOCA RATON, FL 33433

Title: () Delete Title: (X) Change () Addition

FARRACI, ISADORE NUMEROFF, DONNA Name: Name: 6351 WALK CIRCLE 6351 WALK CIRCLE Address: Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: BOCA RATON, FL 33433

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: ROBERT HOLLAND Ρ 04/01/2009