

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J44302

FILED
Feb 22, 2007
Secretary of State

Entity Name: GARDEN WALK, INC.

Current Principal Place of Business:

8200 MILITARY TRAIL
C/O HOMEOWNERS ASSOC.
PALM BEACH GARDENS, FL 33410 US

New Principal Place of Business:

Current Mailing Address:

8200 MILITARY TRAIL
C/O JEFFREY FISHER
PALM BEACH GARDENS, FL 33410 US

New Mailing Address:

FEI Number: 59-2778986

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISHER, JEFFREY
405 WINTER LANE
PALM BEACH GARDENS, FL 33410 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FISHER, JEFFREY
Address: 405 WINTER LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: V () Delete
Name: TARTARILLA, PETER
Address: 114 WINTER PARK
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: S () Delete
Name: FOULK, JEFFREY
Address: 50 SOUTH FOUR SEASONS
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: T () Delete
Name: AHLMAN, JOHN
Address: 213 NORTH FOUR SEASONS
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: SATIR, JOANN
Address: 404 WINTER LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D (X) Delete
Name: SZELAZEK, STANLEY
Address: 346 SUMMER CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: KASTNER, BARBARA
Address: 419 WINTER LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410

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

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN AHLMAN

T

02/22/2007

Electronic Signature of Signing Officer or Director

Date