

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006237

FILED
Apr 02, 2011
Secretary of State

Entity Name: TOWNWALK VILLAS HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

634 LOUISA STREET
#5
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

634 LOUISA STREET
#5
KEY WEST, FL 33040

New Mailing Address:

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

Name and Address of Current Registered Agent:

TITTEL, CHRISTOPHER J
634 LOUISA STREET
#5
KEY WEST, FL 33040 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: PST
Name: TITTEL, CHRISTOPHER J
Address: 634 LOUISA STREET #5
City-St-Zip: KEY WEST, FL 33040

Title: MGRM
Name: COZINE, ROBIN J
Address: 634 LOUISA STREET #3
City-St-Zip: KEY WEST, FL 33040

Title: MGRM
Name: LEAN, DAMIAN
Address: 634 LOUISA STREET #1
City-St-Zip: KEY WEST, FL 33040

Title: MGRM
Name: MAAS, JOEL
Address: 634 LOUISA STREET #4
City-St-Zip: KEY WEST, FL 33040

Title: MGRM
Name: MACHADO, MICKEY
Address: 634 LOUISA STREET #2
City-St-Zip: KEY WEST, FL 33040

I hereby 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 all other like empowered.

SIGNATURE: CHRISTPHER TITTEL

PST

04/02/2011

Electronic Signature of Signing Officer or Director

Date