## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N36246

FILED Mar 31, 2009 Secretary of State

Entity Name: WALKER'S GLEN HOMEOWNERS ASSOCIATION, INC.

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

1209 U.S. HIGHWAY 1 SEBASTIAN, FL 32958 US

**Current Mailing Address: New Mailing Address:** 

1209 U.S. HIGHWAY 1 SEBASTIAN, FL 32958 US

FEI Number: 65-0210468 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:

SCHLITT PROPERTY MANAGEMENT 1209 US HIGHWAY 1 SEBASTIAN, FL 32958 US

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

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete DALY, JAMES DALY, JAMES SR Name: Name:

2500 45TH AVE Address: 2500 45TH AVE Address: City-St-Zip: VERO BEACH, FL 32-96\ City-St-Zip: VERO BEACH, FL 32966

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

KERENTZ, VAROUJAN Name: KERENTZ, VAROUJAN Name: Address: 2325 46TH AVE Address: 2325 46TH AVE

City-St-Zip: VERO BEACH, FL 32966 City-St-Zip: VERO BEACH, FL 32966

Title: () Delete Title: (X) Change ( ) Addition POPE, CHARLES BLUM, STEVE Name: Name:

2305 46TH AVENUE Address: Address: 4480 25TH LANE City-St-Zip: VERO BEACH, FL 32966 City-St-Zip: VERO BEACH, FL 32966

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

Name: SMITH, TRAVIS Name: WEISBERG, PATTIANNE Address: 2460 45TH AVE Address: 4550 22ND LANE City-St-Zip: VERO BEACH, FL 32966 City-St-Zip: VERO BEACH, FL 32966

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

HANKS, DAMA POLLARD, SHIRLEY Name: Name: 2505 46TH AVE 2440 45TH AVENUE Address: Address: VERO BEACH, FL 32966 City-St-Zip: City-St-Zip: VERO BEACH, FL 32966

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: JIM DALY, SR Ρ 03/31/2009