2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N94000001132

1. Entity Name
WALKER'S GLEN WEST HOMEOWNERS ASSOCIATION,



FILED Apr 07, 2008 8:00 am Secretary of State 04-07-2008 90042 001 ****61.25

INC.													
100 VISTA ROYALE BOULEVARD 100			uiling Address DO VISTA ROYALE BOULEVARD ERO BEACH, FL 32962										
Principal Place of Business - No P.O. Box #			3. Mailing Address										
Suite, Apt. #, etc.		Şu	Suite, Apt. #, etc.				02132008	Chg-N	ın.	CDa	E027 (42106)		
City & State		City & State					4. FEI Numb		4 1-	CRZ	E037 (12/06)	Applied For	
Zip Country						65-0515087			ot Applicable				
ZIP					intry							dditional red	
÷ .	6. Name and Address of Current	t Registere	d Agent		Name		7. Name and	Address	of New I	Register	ed Agent		
CLEMENTE, LOIS R			Name Street Address			ono /D							
6606 20TH STREET VERO BEACH, FL 32966-8613			Street Address				O. Box Numb	EI IS NOU	чссеріар	·····			
					City		· · · · · · · ·			F	Zip Co	de	
	e named entity submits this statement fi	or the purp	ose of changing its re	egistere	ed office or reg	gistered	d agent, or bo	th, in the	State of F	lorida. I	am familiar wit	n, and accept	
the obligation	tions of registered agent.												
SIGNATURE			#bl- 0.075										
	Signature, typed or printed name of registered agen	at and title if app	MCable. (NOTE:	Hegistere	d Agent signature rec	equired w	hen reinstating)			DA	E		
	Filing Fee is \$61.25 Due by May 1, 2008			9. Election Campaign Financing Trust Fund Contribution.				1					
	•			_	~ —	\$	55.00 May E	e			eck payable partment of		
10.	•	IRECTORS		_	~ —	٨	dded to Fees		Flo	rida De		State	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2008 OFFICERS AND DI DECHEUBELL, EDWARD 5410 25TH PLACE	IRECTORS		11. TITLE NAMI	E ET ADDRESS	٨	dded to Fees		Flo	rida De	partment of	N 10	
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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:

772-567-2792