## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000004028

FILED Apr 21, 2008 Secretary of State

Entity Name: WALNUT CREEK COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 7500 NW 20 STREET PEMBROKE PINES, FL 33024 **Current Mailing Address: New Mailing Address:** 7500 NW 20 STREET PEMBROKE PINES, FL 33024 FEI Number: 65-0886940 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BAKALAR, BROUGH & CHADROW, P.A. ATTORNEY 150 SOUTH PINE ISLAND ROAD 540 PLANTATION, FL, FL 33324 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Delete () Change () Addition GROSS, JEFF PRESIDE Name: Name: 7575 NW 19 DRIVE Address: Address: PEMBROKE PINES, FL 33024 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition ROBERT, SENATORE TREASUR Name: Name: Address: 2935 NW 78TH WAY Address: City-St-Zip: PEMBROKE PINES, FL 33024 City-St-Zip: Title: SEC () Delete Title: () Change () Addition HALPERN, SUSAN SECRETA Name: Name: Address: 2167 NW 73 TERRACE Address: City-St-Zip: PEMBROKE PINES, FL 33024 City-St-Zip: ( ) Delete Title: VΡ Title: () Change () Addition Name: MARIA, KOPEL VP Name: 17855 NW 19TH COURT Address: Address: City-St-Zip: PEMBROKE PINES, FL 33024 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition BARUA, RATAN VP Name: Name: 7531 NW 23RD STREET Address: Address: City-St-Zip: PEMBROKE PINES, FL 33024 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition MUNJU, ALI N VP MUNJU, ALI N. VP Name: Name: Address: 7700 NW 23TH COURT Address: 7700 NW 23TH COURT PEMBROKE PINES, FL 33024 PEMBROKE PINES, FL 33024 City-St-Zip: City-St-Zip:

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: SOF PRES 04/21/2008