

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769535

Entity Name: BOCA WALK HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O SUPERIOR ASSOCIATION MANAGEMENT
20283 STATE ROAD 7 SUITE 219
BOCA RATON, FL 33498**Current Mailing Address:**SUPERIOR ASSOCIATION MANAGEMENT
20283 STATE ROAD 7 SUITE 219
BOCA RATON, FL 33498 US**FEI Number:** 59-2378201**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GERSTIN, JOSHUA ESQ.
40 S.E. 5TH STREET
SUITE 610
BOCA RATON, FL 33432 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:** JOSHUA GERSTIN, ESQ.

02/06/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	PURDIE, ELIZABETH
Address	SUPERIOR ASSOCIATION MANAGEMENT 20283 STATE ROAD 7 SUITE 219
City-State-Zip:	BOCA RATON FL 33498

Title	VP
Name	WHARTON, SANDRA
Address	SUPERIOR ASSOCIATION MANAGEMENT 20283 STATE ROAD 7 SUITE 219
City-State-Zip:	BOCA RATON FL 33498

Title	TREASURER
Name	NEPI, MATTIA
Address	C/O SUPERIOR ASSOCIATION MANAGEMENT 20283 STATE ROAD 7 SUITE 219
City-State-Zip:	BOCA RATON FL 33498

Title	SECRETARY
Name	DIROSARIO, FRANK
Address	C/O SUPERIOR ASSOCIATION MANAGEMENT 20283 STATE ROAD 7 SUITE 219
City-State-Zip:	BOCA RATON FL 33498

Title	DIRECTOR
Name	PAULUS, DOROTHY
Address	C/O SUPERIOR ASSOCIATION MANAGEMENT 20283 STATE ROAD 7 SUITE 219
City-State-Zip:	BOCA RATON FL 33498

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: MATTIA NEPI

TREASURER

02/06/2025

Electronic Signature of Signing Officer/Director Detail

Date