

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09712

**FILED**  
**Mar 17, 2020**  
**Secretary of State**  
**1895903538CC**

**Entity Name:** CAPTAIN'S WALK ASSOCIATION, INC.

**Current Principal Place of Business:**

475 PELICAN WAY  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

JMD PROPERTIES  
904 SE 5TH AVENUE  
DELRAY BEACH, FL 33483

**FEI Number:** 59-2625690

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JMD PROPERTIES, INC.  
904 SE 5TH AVE.  
DELRAY BEACH, FL 33483 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

**Officer/Director Detail :**

Title TD  
Name FEERY, SHARON  
Address 210 CAPTAINS WALK #712  
City-State-Zip: DELRAY BEACH FL 33483

Title PD  
Name MCCLAIN, GARY  
Address 240 CAPTAIN'S WALK #502  
City-State-Zip: DELRAY BEACH FL 33483

Title VP  
Name SNYDERMAN, FRED  
Address 240 CAPTAINS WALK #503  
City-State-Zip: DELRAY BEACH FL 33483

Title SECRETARY  
Name ISEMAN, MICHAEL  
Address 210 CAPTAINS WALK #702  
City-State-Zip: DELRAY BEACH FL 33483

Title DIRECTOR  
Name ANDERSON, STEPHEN  
Address 210 CAPTAINS WALK #717  
City-State-Zip: DELRAY BEACH FL 33484

*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:** GARY MCCLAIN

**PRESIDENT**

**03/17/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date