

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000050973

**Entity Name:** HARBORWALK HOLDING, LLC**Current Principal Place of Business:**10 HARBOR BLVD  
DESTIN, FL 32541**Current Mailing Address:**4471 LEGENDARY DRIVE  
DESTIN, FL 32541 US**FEI Number:** 27-0243415**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LYNN, TOM ESQ.  
4471 LEGENDARY DRIVE  
DESTIN, FL 32541 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:** TOM LYNN

04/29/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title CEO  
Name BOS, PETER H JR.  
Address 4471 LEGENDARY DRIVE  
City-State-Zip: DESTIN FL 32541

Title COO, PRESIDENT  
Name KNOWLES, PETE  
Address 4471 LEGENDARY DRIVE  
City-State-Zip: DESTIN FL 32541

Title CFO, TREASURER  
Name BLOCKER, TRACIE  
Address 4471 LEGENDARY DRIVE  
City-State-Zip: DESTIN FL 32541

Title CHIEF LEGAL OFFICER  
Name LEGLER, MITCHELL W  
Address 4471 LEGENDARY DRIVE  
City-State-Zip: DESTIN FL 32541

Title SECRETARY, GENERAL COUNSEL  
Name LYNN, THOMAS  
Address 4471 LEGENDARY DRIVE  
City-State-Zip: DESTIN FL 32541

Title VP  
Name HODGES, DESTINEE  
Address 10 HARBOR BLVD  
City-State-Zip: DESTIN FL 32541

Title VP  
Name MALLORY, LEYDA  
Address 10 HARBOR BLVD  
City-State-Zip: DESTIN FL 32541

Title VP  
Name PETERSON, BRANDON  
Address 10 HARBOR BLVD  
City-State-Zip: DESTIN FL 32541

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*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** THOMAS LYNN**SECRETARY**

04/29/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title	VP
Name	STORCH, JANET
Address	10 HARBOR BLVD
City-State-Zip:	DESTIN FL 32541