

2023 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:**WARD, LORI ELLEN 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:** LORI ELLEN WARD

04/26/2023

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 WARD, LORI ELLEN
Address 4471 LEGENDARY DRIVE
City-State-Zip: DESTIN FL 32541

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

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

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

Continues on page 2

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: LORI ELLEN WARD**SECRETARY**

04/26/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

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

Title VP
Name STORCH, JANET
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