

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 149631

FILED  
Jan 27, 2008  
Secretary of State

Entity Name: WALDEN INVESTMENT CO INC

## Current Principal Place of Business:

408 W. RENFRO STREET  
PLANT CITY, FL 33563

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 1569  
PLANT CITY, FL 335641569

## New Mailing Address:

FEI Number: 59-0567826

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALDEN, DON  
408 W RENFRO  
PLANT CITY, FL 33563 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WALDEN, DON  
Address: 408 W RENFRO  
City-St-Zip: PLANT CITY, FL

Title: SD ( ) Delete  
Name: WALDEN, LOIS  
Address: 408 W RENFRO  
City-St-Zip: PLANT CITY, FL 33563

Title: VD ( ) Delete  
Name: WALDEN, SELINDA B  
Address: 408 W RENFRO  
City-St-Zip: PLANT CITY, FL 33563

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: WALDEN, DON  
Address: 408 W RENFRO  
City-St-Zip: PLANT CITY, FL 33563

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DON WALDEN

PD

01/27/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date