

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 MAR 31 AM 10:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **A97000001128**

1. Entity Name
WALKER INVESTMENT GROUP, LTD.

Principal Place of Business
**2143 GOLDEN EAGLE DRIVE
TALLAHASSEE FL 32312**

Mailing Address
**2143 GOLDEN EAGLE DRIVE
TALLAHASSEE FL 32312-4038**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country Zip Country

4. FEI Number **59-3443682** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**WALKER, ROBERT E
2143 GOLDEN EAGLE DRIVE
TALLAHASSEE FL 32312**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **\$1,980,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. **MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION	13. ADDRESS CHANGES ONLY
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP WALKER, ROBERT E 2143 GOLDEN EAGLE DRIVE TALLAHASSEE FL 32312	STREET ADDRESS CITY - ST - ZIP 300003213623--3 -04/19/00--01002--016 ****526.25 ****526.25
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP WALKER, JANET M 2143 GOLDEN EAGLE DRIVE TALLAHASSEE FL 32312	STREET ADDRESS CITY - ST - ZIP
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP CHAMBERS, CAROLE W 8810 LAUREL GROVE LANE KNOXVILLE TN 37922	STREET ADDRESS CITY - ST - ZIP
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP CHAMBERS, G. EDWARD 8810 LAUREL GROVE LANE KNOXVILLE TN 37922	STREET ADDRESS CITY - ST - ZIP
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP WUNDERLICH, DIANE W 1844 GRASSINGTON WAY JACKSONVILLE FL 32223	STREET ADDRESS CITY - ST - ZIP
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP WUNDERLICH, ROBERT L 1844 GRASSINGTON WAY JACKSONVILLE FL 32223	STREET ADDRESS CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: _____ SIGNATURE REQUIRED **ROBERT E WALKER** Date **3-29-00** Daytime Phone # **850-893-1353**

CR2E003 (9/99)