

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 09, 1999 8:00 am
Secretary of State

09-09-1999 90004 034 ****61.25

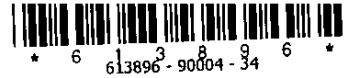
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DOCUMENT # **N93000002779**

Corporation Name
WALK WORTHY, INC.

Principal Place of Business
**608 VENEER DRIVE
ALTAMONTE SPRINGS FL 32714**

Mailing Address
**608 VENEER DRIVE
ALTAMONTE SPRINGS FL 32714**



Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/14/1993	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 59-3192276	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip Country		Zip Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent

**WHITE, MARC R
608 VENEER DRIVE
ALTAMONTE SPRINGS FL 32714**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

I, Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE		SIGNATURE, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)		DATE	
1. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
LE	D	WHITE, MARC	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ME		608 VENEER DRIVE		1.2 NAME			
REET ADDRESS		ALTAMONTE SPRINGS FL 32714		1.3 STREET ADDRESS			
Y-ST-ZIP				1.4 CITY-ST-ZIP			
LE	D	WHITE, SANDRA	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ME		608 VENEER DRIVE		2.2 NAME			
REET ADDRESS		ALTAMONTE SPRINGS FL 32714		2.3 STREET ADDRESS			
Y-ST-ZIP				2.4 CITY-ST-ZIP			
LE	D	SMITH, DAN	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ME		2000 E HILLCREST ST		3.2 NAME			
REET ADDRESS		ORLANDO FL		3.3 STREET ADDRESS			
Y-ST-ZIP				3.4 CITY-ST-ZIP			
LE			<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ME				4.2 NAME			
REET ADDRESS				4.3 STREET ADDRESS			
Y-ST-ZIP				4.4 CITY-ST-ZIP			
LE			<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ME				5.2 NAME			
REET ADDRESS				5.3 STREET ADDRESS			
Y-ST-ZIP				5.4 CITY-ST-ZIP			
LE			<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ME				6.2 NAME			
REET ADDRESS				6.3 STREET ADDRESS			
Y-ST-ZIP				6.4 CITY-ST-ZIP			

I, 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 annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/1/99 (407) 774-0550

Date

Daytime Phone #

CR2E037 (5/99)