

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002779

FILED  
Jul 02, 2007  
Secretary of State

Entity Name: WALK WORTHY, INC.

**Current Principal Place of Business:**

14030 LAKE YALE ROAD  
UMATILLA, FL 32784

**New Principal Place of Business:**

**Current Mailing Address:**

14030 LAKE YALE ROAD  
UMATILLA, FL 32784

**New Mailing Address:**

FEI Number: 59-3192276      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

WHITE, MARC R  
14030 LAKE YALE ROAD  
UMATILLA, FL 32784      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: WHITE, MARC PRES.  
Address: 14030 LAKE YALE ROAD  
City-St-Zip: UMATILLA, FL 32784 US

Title: D      ( ) Delete  
Name: WHITE, SANDRA VP  
Address: 14030 LAKE YALE ROAD  
City-St-Zip: UMATILLA, FL 32784 US

Title: D      ( ) Delete  
Name: GORDON, BRUCE  
Address: 3 PENNY LANE  
City-St-Zip: STAFFORD SPRINGS, CT 06076 US

Title: D      ( ) Delete  
Name: THOMPSON, SAM  
Address: 2303 SWEETAIRE CT  
City-St-Zip: APOPKA, FL 32712 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

Title: D      (X) Change ( ) Addition  
Name: THOMPSON, SAM  
Address: PO BOX 166  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA WHITE

VPD

07/02/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date