2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 19, 2007 8:00 am Secretary of State DOCUMENT # P22585 03-19-2007 90071 045 ***150.00 WALTER INDUSTRIES, INC. Principal Place of Business Mailing Address 4211 W BOY SCOUT BLVD **4211 W BOY SCOUT BLVD** 40037930 **SUITE 1000 TAX DEPT SUITE 1000** TAMPA, FL 33607 TAMPA, FL 33607 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01052007 CR2E034 (12/06) Chg-P City & State City & State 4. FEI Number Applied For 13-3429953 Not Applicable Žip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWIN FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. **PCEO** TITLE TITLE XIX Delete Change XX Addition D HYLAND, GREGORY E NAME NAME O'Brien, Mark J. STREET ADDRESS 4211 W BOY SCOUT BLVD STREET ADDRESS 4211 W Boy Scout Blvd.Ste.1000 CITY-ST-ZIP TAMPA, FL 33607 CITY-ST-ZIP Tampa, FL 33607 AC TITLE ☐ Delete TITLE ☐ Change Addition EISCH, CYNTHIA B NAME NAME STREET ADDRESS 4211 W BOY SCOUT BLVD STREET ADDRESS CITY-ST-ZIP **TAMPA, FL 33607** CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition PATRICK, VICTOR P MAME MALIF STREET ADDRESS 4211 W. BOY SCOUT BLVD. STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33607 CITY-ST-ZIP ☐ Delete THUE Addition ☐ Change TOKARZ, MICHAEL T NAME NAME STREET ADDRESS 9 WEST 57TH ST STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 33607 CITY-ST-ZIP TITLE TITLE XIX Delete ☐ Change 💢 🖾 Addition EVCFO NAME GOLKIN, PERRY Troy, Joseph J. STREET ADDRESS 4211 W BOY SCOUT BLVD STREET ADDRESS 4211 W Boy Scout Blvd.Ste.1000 CITY-ST-ZIP TAMPA, FL 33607 CITY-ST-ZIP Tampa, FL 33607 TITLE Delete TITLE SVT DEARDEN, MILES C III NAME NAME 4211 W. BOY SCOUT BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33607 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Cynthia B. Eisch

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: By

FILED

Daytime Phone #