

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000206872

**Entity Name:** WALKER'S DRYWALL LLC

**Current Principal Place of Business:**

480 DOVE DR  
KISSIMMEE, FL 34759

**Current Mailing Address:**

480 DOVE DR  
KISSIMMEE, FL 34759 US

**FEI Number:** 83-1749192

**Certificate of Status Desired:** No

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

WALKER, PETER R  
480 DOVE DR  
KISSIMMEE, FL 34759 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

**Authorized Person(s) Detail :**

Title MGR  
Name WALKER, PETER R  
Address 603 MERCADO CT  
City-State-Zip: KISSIMMEE FL 34758

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PETER WALKER

**OWNER**

**04/25/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date