

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 374824

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

**Entity Name:** WALKER CARIBBEAN, INC.

**Current Principal Place of Business:**

650 PARK ST  
JACKSONVILLE, FL 32204

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 2788  
JACKSONVILLE, FL 32203

**New Mailing Address:**

**FEI Number:** 59-1366103

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WALKER, DAVID S  
650 PARK ST.  
JACKSONVILLE, FL 32204 US

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

WALKER, DAVID S  
650 PARK ST.  
JACKSONVILLE, FL 32204 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:** DAVID S WALKER

04/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** WALKER, DAVID S  
**Address:** 650 PARK ST  
**City-St-Zip:** JACKSONVILLE, FL

**Title:** S  
**Name:** COHN, BRENDA M  
**Address:** 1546 GEMINI COURT  
**City-St-Zip:** ORANGE PARK, FL 32073

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 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** BRENDA M COHN

SEC

04/09/2012

Electronic Signature of Signing Officer or Director

Date