

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 396892 (2)

1. Corporation Name
WALKER'S ROCK BOTTOM FARM, INC.

Principal Place of Business

RT 3 BOX 3510
QUINCY FL 32351
US

Mailing Address

R 3 BOX 3510
QUINCY FL 32351-9524
US



2. Principal Place of Business

2a. Mailing Address

21 State Apt. #, etc.

26 State Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

WALKER, SARA
RT 3 BOX 3510
QUINCY FL 32351

3. Date Incorporated or Qualified

03/06/1972

3a. Date of Last Report

03/13/1996

4. FEI Number

59-1389471

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, 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 understand with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(NOTE: Registered Agent signature required when recertifying)

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE STD
12.2 NAME WALKER, SARA JO
12.3 STREET ADDRESS RT 3 BOX 3510
12.4 CITY-STATE-ZIP QUINCY FL
12.5 TITLE PD
12.6 NAME WALKER III, ISAAC W
12.7 STREET ADDRESS RT 3 BOX 3510
12.8 CITY-STATE-ZIP QUINCY FL
12.9 TITLE
12.10 NAME
12.11 STREET ADDRESS
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12.100 CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE
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13.99 STREET ADDRESS
13.100 CITY-STATE-ZIP

14. I, the undersigned, 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of changes, or on an attachment with an address.

SIGNATURE:

Sara Jo Walker

2-10-97

904-875-3834

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0051360

CR2E034 (9/96)