

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 17, 2003 8:00 am
Secretary of State

01-17-2003 90103 005 ***150.00

DOCUMENT # 411078

1. Entity Name
DONALD C. WALKER, INC.



Principal Place of Business
**7776 OLYMPIA DRIVE
WEST PALM BEACH FL 33411**

Mailing Address
**8195 N MILITARY TRAIL
SUITE C
PALM BCH GARDENS FL 33410
US**

2. Principal Place of Business

3. Mailing Address

**7776 OLYMPIA DRIVE
SUITE, Apt. #, etc.
WEST PALM BEACH**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

FLORIDA

Zip

Country

Zip

33411

Country

US

4. FEI Number

59-1429698

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WALKER, DONALD C
8195 N MILITARY TRAIL
STE C
PALM BEACH GARDENS FL 33410**

Name

DONALD C. WALKER

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

7776 OLYMPIA DRIVE

City

WEST PALM BEACH FL

Zip Code

33411

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 **DONALD C. WALKER**

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **TS** ☐ Delete
NAME **SCHIRMEISTER, ROSE**
STREET ADDRESS **8195 N. MILITARY TRAIL # C**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

TITLE **P** ☒ Change ☐ Addition
NAME **DONALD C. WALKER**
STREET ADDRESS **7776 OLYMPIA DRIVE**
CITY-ST-ZIP **WEST PALM BEACH, FL 33411**

TITLE **TS** ☐ Delete
NAME **WALKER, DONALD C**
STREET ADDRESS **8195 N. MILITARY TRAIL # C**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

TITLE **V** ☒ Change ☐ Addition
NAME **BARBARA J. WALKER**
STREET ADDRESS **7776 OLYMPIA DRIVE**
CITY-ST-ZIP **WEST PALM BEACH, FL 33411**

TITLE **V** ☐ Delete
NAME **WALKER, BARBARA J**
STREET ADDRESS **8895 N MILITARY TRAIL**
CITY-ST-ZIP **WEST PALM BCH, FL 00000**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby 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 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.

SIGNATURE:

DONALD C. WALKER
DONALD C. WALKER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN. 14, 2003 561-627-7276
Date Daytime Phone #

CR2E034 (10/02)