


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # 428048 1. Entity Name WALKER ELECTRIC, INC.	
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Principal Place of Business 13670 SUGAR COWL RD MYAKKA CITY, FL 34251 US	Mailing Address 13670 SUGAR COWL RD MYAKKA CITY, FL 34251 US
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02012008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1468383	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WALKER, ROBERT D JR 13670 SUGAR BOWL RD MYAKKA CITY, FL 34251

**DO NOT WRITE
IN THIS SPACE**

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 reappointing) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

111111114683812
03/22/06-00051-010 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WALKER, ROBERT D., JR. 13670 SUGAR BOWL RD MYAKKA CITY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WALKER, ROSE 13670 SUGAR BOWL RD MYAKKA CITY, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: Rose Walker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/06 941
Date Daytime Phone #