2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 519087

Name:

Address:

City-St-Zip:

HUMPHRESS, JOHN K,

TALLAHASSEE, FL 323012677

1040 E PARK AVE

BETTY L. WALKER, INCORPORATED

FILED Jan 04, 2005 Secretary of State

Entity Nar	me: BEITYL	WALKER, INCORPORATEL	,		
Current Principal Place of Business:			New Principal	New Principal Place of Business:	
1040 E PARK AVE TALLAHASSEE, FL 32301				1040 E PARK AVE TALLAHASSEE, FL 323012677	
Current M	lailing Addre	ss:	New Mailing A	New Mailing Address:	
1040 E PARK AVE TALLAHASSEE, FL 32301				1040 E PARK AVE TALLAHASSEE, FL 323012677	
FEI Number:	: 59-1702919	FEI Number Applied For ()	FEI Number Not Applicable	e () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Add	Name and Address of New Registered Agent:	
1040 E PA TALLAHAS The above	SSEE, FL 323	801 US			
SIGNATUR	RE:			01/04/2005	
		nic Signature of Registered Aong Trust Fund Contribution ().	•	Date HANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	WADSWORTH 1040 E PARK) Delete I, JAMES B J, R AVE E, FL 323012677	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HOLLAR, ROE 1040 E PARK		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D () Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: JAMES B WADSWORTH JR PRES 01/04/2005