2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 13, 2005 08:00 AM Secretary of State

4/10/05

DOCUI 1. Entity Name WALK-A-I					Secre	ctary of State	
Principal Place of Business 3658 GOLD NUGGET CT PORT ORANGE, FL 32129 US Mailing Address 3658 GÖLD NUGGET CT PORT ORANGE, FL 32129 US PORT ORANGE, FL 32129			US	1 1300 (6 80)	. 1888 11 1884 1884 1886 1886	ntan ding angg sasu bish bishasal ki lost	
DO NOT WRITE IN THIS SPACE				02012005 No Chg-P CR2E034 (10/03) 4. FEI Number			
3658 GOLI PORT ORA	6. Name and Address of Current Ru L, RANDALL D NUGGET CT ANGE, FL 32129	DO NOT WRITE IN THIS SPACE					
the obligat	named entity submits this statement for toons of registered agent. Signature, typed or printed name of registered agent and E NOWILL FEE IS \$150.00 ay 1, 2005 Fee will be \$550.06	d title if applicable (NOTE Register 9. Election Campaign Fina	red Agent signature require		th, in the State of Flo	rida. I am familiar with, and accept	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CAMPBELL, RANDALL W. 3658 GOLD NUGGET CT PORT ORANGE, FL 32129				— U0000 04/13/05	0301759 -80045-019 150.00	
TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DRESS .			DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. hereby	certify that the information supplied with	this filling does not qualify for the extrusion and accurate and that my give	cemption stated in S	section 119,07(3)	(i), Florida Statutes.	further cartify that the information	
of the co	certify that the information supplied with on this report or supplemental report is poration or the receiver of trustee empor , or on an attachment with an address y	wered to execute this report as req ith all other like empowered.	uired by Chapter 60	7, Florida Statut	es; and that my nam	e appears in Block 10 or Block 11 if	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR