

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04389

FILED
Apr 16, 2010
Secretary of State

Entity Name: WALKER FURNITURE, INC.

Current Principal Place of Business:

113 NORTHWEST EIGHTH AVENUE
C/O BENNY L. WALKER
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

113 NORTHWEST EIGHTH AVENUE
C/O BENNY L. WALKER
GAINESVILLE, FL 32601

New Mailing Address:

FEI Number: 59-2033588 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, BENNY L.
113 NORTHWEST EIGHTH AVENUE
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDC
Name: WALKER, BENNY L.
Address: 113 N.W. 8TH AVE.
City-St-Zip: GAINESVILLE, FL

Title: VD
Name: WALKER, ANNE O.
Address: 113 N.W. 8TH AVE.
City-St-Zip: GAINESVILLE, FL

Title: TD
Name: SMITH, MYRTICE WALKER
Address: 113 NW 8TH AVE.
City-St-Zip: GAINESVILLE, FL

Title: SD
Name: WALKER, MARY KATE
Address: 113 NW 8TH AVE.
City-St-Zip: GAINESVILLE, FL

Title: D
Name: SMITH, JEFFREY MAX
Address: 113 NW 8TH AVE.
City-St-Zip: GAINESVILLE, FL

I hereby 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 all other like empowered.

SIGNATURE: MYRTICE WALKER SMITH

TD

04/16/2010

Electronic Signature of Signing Officer or Director

_____ Date