

F08000004822

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

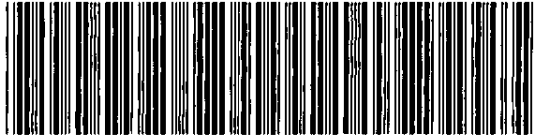
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W08-49832



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**COVER LETTER**

08 NOV -7 PM 4:52

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** WALKER ASSOCIATES, INC.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Gregory Shea  
(Name of Person)

Walker Associates, Inc.  
(Firm/Company)

Two Oliver Street  
(Address)

Boston, MA 02109  
(City/State and Zip code)

For further information concerning this matter, please call:

Gregory Shea at ( 617 ) 960-4510  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee     \$78.75 Filing Fee & Certificate of Status     \$78.75 Filing Fee & Certified Copy     \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

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08 NOV -7 AM 8:00

DIVISION OF CORPORATIONS

October 30, 2008

GREGORY SHEA  
TWO OLIVER STREET  
BOSTON, MA 02109

SUBJECT: WALKER ASSOCIATES, INCORPORATED  
Ref. Number: W08000049832

We have received your document for WALKER ASSOCIATES, INCORPORATED and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 208A00055686

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DIVISION OF CORPORATIONS

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*Please see attached "corrected" original  
Thank you!*

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. The Walker Associates, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

The Walker Associates, Inc. of Massachusetts  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Massachusetts 3. 042713691  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1980 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. N/A  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. Two Oliver Street, Boston, MA 02109  
(Principal office address)

Two Oliver Street, Boston, MA 02109  
(Current mailing address)

8. Professional Debt Collection & Extended Business Office Services  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)


Name: Kim Scherig

Office Address: 13029 St. Filagree Dr.

Riverview, Florida 33579  
(City) (Zip code)

10. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and business addresses of officers and/or directors:

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DIVISION OF CORPORATIONS

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**A. DIRECTORS**

Chairman: Paul S. Colahan

Address: Two Oliver St.

Boston, MA 02109

Vice Chairman: Stephen Colahan

Address: Two Oliver Street

Boston, MA 02109

Director: Anthony E. Slabacheski

Address: Two Oliver Street

Boston, MA 02109

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Stephen P. Colahan

Address: Two Oliver Street

Boston, MA 02109

Vice President: Anthony E. Slabacheski

Address: Two Oliver Street

Boston, MA 02109


Secretary: Rosemary A. Ward

Address: Two Oliver Street, Boston, MA 02109

Treasurer: Paul Colahan

Address: Two Oliver Street, Boston, MA 02109

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Stephen P. Colahan, President

(Typed or printed name and capacity of person signing application)



*The Commonwealth of Massachusetts*  
*Secretary of the Commonwealth*  
*State House, Boston, Massachusetts 02133*

**William Francis Galvin**  
Secretary of the  
Commonwealth

**October 28, 2008**

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

**THE WALKER ASSOCIATES, INC.**

is a domestic corporation organized on **November 14, 1980**, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.

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In testimony of which,  
I have hereunto affixed the  
Great Seal of the Commonwealth  
on the date first above written.

*William Francis Galvin*

Secretary of the Commonwealth

