2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F36079

1. Entity Name

HANSON, WALTER & ASSOCIATES, INC.



FILED Apr 21, 2008 08:00 Al Secretary of State

Principal Place of Business

400 W EMMETT ST KISSIMMEE, FL 34741-5481 Mailing Address

400 W EMMETT ST KISSIMMEE, FL 34741-5481



DO NOT WRITE IN THIS SPACE

04162008 No Chg-P CR2E034 (11/05)

| 4. | FEI Number | | | Applied For |
|----|-------------------------------|--|------------------|----------------|
| | 59-2109485 | | | Not Applicable |
| 5. | Certificate of Status Desired | | \$8.75 Fee Re | 5 Additional |

6. Name and Address of Current Registered Agent

WALTER, LARRY W 400 W EMMETT ST KISSIMMEE, FL 34741

SIGNATURE:

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 reinstating) DATE | | | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution. | | | - - + | | | | |
| 10. | OFFICERS AND DIREC | TORS | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPT HANSON, RANDY K. 1390 OAK SHORE DR ST. CLOUD, FL | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD WALTER LARRY W. 3851 CITRUS STREET KISSIMMEE, FL | | | U00000908961 05/06/08-80030-019 150.00 | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S HINDLE, SHAWN D 2228 JESSICA LANE KISSIMMEE, FL | | DO | NOT WRITE | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | · IN | THIS SPACE | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | i | | | | | |
| 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 receiper 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; | | | | | | | |