FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

'95 APR 28 AM 10:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F60496 (9)

1. Corporation Name
HAROLD WALKER PROPERTIES, INC.

Principal Place of Business	Mailing Address
~~3805 N W 38ST~~ ~~GAINESVILLE FL 32606~~ US	~~3805 N W 38ST~~ ~~GAINESVILLE FL 32606~~ US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/18/1981
3a. Date of Last Report: 04/25/1994

2. Principal Place of Business
21 21454 N.E. 111 AVE.
Suite, Apt. #, etc. 22
City & State 23 EARLETON FL
Zip 24 32631 Country 25

2a. Mailing Address
26 P.O. Box 565
Suite, Apt. #, etc. 27
City & State 28 EARLETON, FL
Zip 29 32631 Country 30 USA

4. FEI Number: 59-2144827 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WALKER, HAROLD E
~~3805 N W 38ST~~
~~GAINESVILLE, FL~~
~~GAINESVILLE FL 32606~~

10. Name and Address of New Registered Agent

81 Name: WALKER HAROLD E.
82 Street Address (P.O. Box Number is Not Acceptable): 21454 N.E. 111 AVE
83
84 City: EARLETON FL 85 Zip Code: 32631

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Harold E Walker HAROLD E. WALKER APR 25, 1995
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	PD ☒ Change ☐ Addition
NAME	WALKER, HAROLD E	12 NAME	WALKER, HAROLD
STREET ADDRESS	~~3805 N W 38ST~~	13 STREET ADDRESS	21454 N.E. 111 AVE
CITY-ST-ZIP	~~GAINESVILLE FL~~	14 CITY-ST-ZIP	EARLETON, FL 32631
TITLE	D	21 TITLE	D ☒ Change ☐ Addition
NAME	WALKER, LORENE	22 NAME	WALKER, LORENE
STREET ADDRESS	~~3805 N W 38ST~~	23 STREET ADDRESS	21454 NE. 111 AVE
CITY-ST-ZIP	~~GAINESVILLE FL~~	24 CITY-ST-ZIP	EARLETON, FL 32631
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: HAROLD WALKER Harold E Walker APR 25 1995 904-468-1984
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0043114 CP