2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006
Secretary of State

DOCUMENT# F95000001689

Entity Name: CARL WALKER, INC.

Current Principal Place of Business:

5136 LOVERS LANE
200
KALAMAZOO, MI 49002

New Principal Place of Business:

Current Mailing Address:

5136 LOVERS LANE
200
KALAMAZOO, MI 49002

New Mailing Address:

FEI Number: 38-2622047 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 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: PTDC ( ) Delete
Name: CUDNEY, GARY L
Address: 3464 WHISTLING LANE
City-St-Zip: KALAMAZOO, MI 49008

Title: VSD ( ) Delete
Name: HIBBARD, FORREST N
Address: 785 WILSON RD., NW
City-St-Zip: ATLANTA, GA 30318

Title: VD ( ) Delete
Name: ORTLIEB, MICHAEL C
Address: 3659 ARBUTUS TRAIL
City-St-Zip: PORTAGE, MI 49024

Title: V ( ) Delete
Name: VAN HUSEN, JIM
Address: 3340 W SHANNON PLACE
City-St-Zip: CHANDLER, AZ 85226

Title: V ( ) Delete
Name: VASONIS, GAILIUS A
Address: 4714 ROMENCE RD
City-St-Zip: PORTAGE, MI 49024

Title: V ( ) Delete
Name: ROWLAND, JOEY D
Address: 8925 SCOTCH HEATHER WAY
City-St-Zip: CHARLOTTE, NC 28277

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DAVID KENT V 01/12/2006

Electronic Signature of Signing Officer or Director — Date