2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 16, 2005 08:00 AM Secretary of State DOCUMENT # F96004 1. Entity Name WALTERS FINANCIAL CORPORATION Principal Place of Business Mailing Address 6302 RIVERSIDE DR. PO BOX 5 YANKEETOWN, FL 34498 US YANKEETOWN, FL 34498 US 02032005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2219772 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent WALTERS, RODNEY N. DO NOT WRITE 11588 N CARIBEE POINT INGLIS, FL 34449 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 little if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS 04/16/05-80015-005 150.00 TITLE WALTERS, KAY S NAME 11588 N CARIBEE POINT STREET ADDRESS CITY-ST-ZIP INGLIS, FL 34449 TITLE STD NAME. WALTERS, RODNEY N STREET ADDRESS 11588 N CARIBEE POINT INGLIS, FL 34449 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7P TIBE

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 receiver 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.

SIGNATURE: Mouleters, President 41,5/05

NAME STREET ADDRESS CITY-ST-ZIP