

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 17, 2002 8:00 am
Secretary of State

07-17-2002 90114 050 ***150.00

DOCUMENT # G05861

1. Entity Name
MICHAEL K. WALKER & ASSOC., INC.

Principal Place of Business
% MICHAEL K WALKER
1793 MANGO AVE.
SARASOTA FL 34234

Mailing Address
% MICHAEL K WALKER
1793 MANGO AVE.
SARASOTA FL 34234

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2249192**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WALKER, MICHAEL K
1732 LOMA LINDA ST.
SARASOTA FL 34239

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DP
WALKER, MICHAEL K.
1732 LOMA LINDA ST.
SARASOTA, FL. 34239 ☐ Delete

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☐ Change ☐ Addition

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SARASOTA, FL. 34239 ☐ Delete

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☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/10/02

Date

Daytime Phone #

CR2E034 (4/02)

Attachment # 605861



121574

MICHAEL K. WALKER & ASSOCIATES, INC.
CONTRACTORS - CONSULTANTS

July 2, 2002

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: 2002 Uniform Business Report

To Whom It May Concern:

We are in receipt of the 2002 Uniform Business Report, received on July 2, 2002. Please be advised that this is the first report we have received from you this year; the last correspondence we had from your office was the 2001 UBR, received on 1/09/01.

We are requesting the \$400.00 late fee be waived, as we have had no prior reports or notices from you for the 2002 year. We are enclosing the original \$150.00 filing fee for this year in addition to the completed UBR.

Thank you for your assistance with this matter.

Sincerely,

Michael K. Walker
President
MICHAEL K. WALKER & ASSOCIATES, INC.

enclosures