## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 **DOCUMENT #** G37604

**(7)** 

WALKER BROS. CONSTRUCTION, INC. OF NAPLES  Principal Place of Business Address 2171 OAKS BLVD 2171 OAKS BLVD					·			
NAPLES FL 339		2171 OAKS BLVD Naples FL 33999 US				DO NOT WRITE IN THIS SPACE		
. 00						3. Date Incorporated or Qualified		
						05/09/1983		
2. Principal Pla	ce of Business	2s. Mailing Address					ed For	
21	<del></del>	26				<b>59-2283905</b> Not A	pplicable	
Suite, Apt. #	etc	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Add Fee Requ		
City & State		City & State			6. Election Campaign Financing \$5.00 M. Trust Fund Contribution Added to 1			
Zip 24	Country 25	Zip 29	9 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
	g. Name and Address of Cu	rrent Registered Agent		-		10. Name and Address of New Registered Agent		
WALKER, ROBERT C.				81	Name			
2171 OAKS BLVD Naples FL 33999				82	Street	Address (P.O. Box Number is Not Acceptable)		
				83				
				53				
				84	City	FL 85 Zip Co		
11. Pursuant to office or re- agent. I am	the provisions of Sections 607 gistered agent, or both, in the S familiar with, and accept the o	.0502 and 607.1508, Florida State of Florida. Such change bligations of, Section 607.05	Statutes, the a was authorize 05, Florida Sta	bove d by tutes	e-named the corp i.	corporation submits this statement for the purpose of changing its reporation's board of directors. I hereby accept the appointment as re-	egistered gistered	
SIGNATURE _								
					nt signature	required when reinstating) DATE	11140	
TITLE	OFFICERS AND DIRECTORS  DELETE		13. IF 113	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	Addition	
NAME	WALKER, ROBERT C	- State		1.2 NAME		I Change L		
STREET ADDRESS				1.3 STREET ADDRESS				
CITY-ST-ZIP NAPLES FL			- 6	1.4 CITY-ST-ZIP				
TITLE	VS DELETE			2.1 TITLE		Change [	Addition	
NAME	WALKER, WILLIAM L			2.2 NAME		, onango		
STREET ADDRESS			8	2 3 STREET ADDRESS				
CITY-ST-ZIP NAPLES FL				2.4 CITY-ST-ZIP				
TITLE	DELETE			3.1 TITLE		Change [	Addition	
NAME			4	AME		1	•	
STREET ADDRESS			1		ADORESS	}		

6.4 CITY-ST-ZIP 14. 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 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, given an attachment with an address.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST-ZIP

4.4 CITY - ST - ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE 6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

NAME

TITLE

NAME STREET ADDRESS

TITLE

DELETE

DELETE

DELETE

Daytime Phone # 0441203

Date

Change

Change

Change

Addition

☐ Addition

Addition

**FILED** 

May 08 1998 8:00am

Secretary of State