2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2005 8:00 am
Secretary of State
01-11-2005 90009 026 ***150.00

DOCUMENT # G48572

1. Entity Name
SIR WALTER, INC.

S00001325

Principal Place of Business	Mailing Address
500 S PLUMOSA ST MERRITT ISLAND, FL 32952-3311 US	500 S PLUMOSA ST MERRITT ISLAND, FL 32952 US

01032005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2301623
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

RALEIGH, E.P.
665 HERON DRIVE
MERRITT ISLAND, FL 32952

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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

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	RALEIGH, E. P.
STREET ADDRESS	665 HERON DR.
CITY-ST-ZIP	MERRITT ISLAND, FL
TITLE	VS
NAME	RALEIGH, M.J.
STREET ADDRESS	665 HERON DR.
CITY-ST-ZIP	MERRITT ISLAND, FL
TITLE	D
NAME	RALEIGH, E P III
STREET ADDRESS	851 SPANISH CAY DR.
CITY-ST-ZIP	MERRITT ISLAND, FL 32952
TITLE	D
NAME	RALEIGH, J.E.
STREET ADDRESS	2860 S. COURTNEY PKWY
CITY-ST-ZIP	MERRITT ISLAND, FL 32952
TITLE	D
NAME	[redacted] RALEIGH, MICHAEL
STREET ADDRESS	245 BIMINI DRIVE
CITY-ST-ZIP	MERRITT ISLAND, FL 32952
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: E P Raleigh E. P. RALEIGH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #