


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2005 8:00 am
Secretary of State

01-07-2005 90019 029 ***150.00

DOCUMENT # J14240 1. Entity Name WALKER CARR CUSTOM BUILDERS, INC.																											
Principal Place of Business 671 LAKESIDE CIRCLE APT# 821 POMPANO BEACH, FL 33060 US		Mailing Address 1239 STONEWALL JACKSON DRIVE DANDRIDGE, TE 37725 US																									
2. Principal Place of Business 451 Heritage Drive Suite, Apt. #, etc. APT # 201 City & State POMPANO BEACH, FLA. Zip 33060 Country US		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country																									
6. Name and Address of Current Registered Agent WALKER, RALPH 671 LAKESIDE CIRCLE APT #821 POMPANO BEACH, FL 33060		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 451 HERITAGE DRIVE APT # 201 City POMPANO BEACH FL Zip Code 33060																									
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 _____ (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. <input type="checkbox"/> \$5.00 May Be Added to Fees																									
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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: <u>JAMES W. CARR, JR. President</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <u>1-4-2005</u> Daytime Phone # <u>865-399-9317</u>																									