

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K07926

(4)

1. Corporation Name

WALZ MARKETING, INC.



Principal Place of Business

C/O NORBERT A. WALZ
3750 U.S. 27 NORTH
SEBRING FL 33870-1644

Mailing Address

% DOUGLAS A WALZ
3750 U.S. 27 NORTH
SEBRING FL 33870-1644
US

3. Date Incorporated or Qualified
12/18/1987

3a. Date of Last Report
05/16/1995

2. Principal Place of Business

2a. Mailing Address

21 1115 NE Lakeview Dr.
Suite, Apt. #, etc.

26 P.O. Box 547
Suite, Apt. #, etc.

4. FEI Number

59-2876007

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

22 City & State

27 City & State

23 Sebring, FL

28 Sebring, FL

24 33870

25 USA

29 33871

30 USA

9. Name and Address of Current Registered Agent

WALZ, DOUGLAS A
3750 U.S. 27 NORTH
SEBRING FL 33872

10. Name and Address of New Registered Agent

81 Name

Douglas A. Walz

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

1115 N.E. Lakeview Dr.

83

84 City

Sebring

FL

85 Zip Code

33870

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

(Signature of registered agent and title, if applicable)

4/24/96

Date

12. OFFICERS AND DIRECTORS

TITLE	P	WALZ, NORBERT A.	4115 LAFAYETTE SEBRING FL	<input type="checkbox"/> DELETE
NAME				
STREET ADDRESS				
CITY - ST - ZIP				
TITLE	VS	WALZ, DOUGLAS ALAN	315 GROSBEAK AVE - SEBRING FL	<input type="checkbox"/> DELETE
NAME				
STREET ADDRESS				
CITY - ST - ZIP				
TITLE	VT	WALZ, JEAN ANN	2910 ANDALUSIA SEBRING FL	<input type="checkbox"/> DELETE
NAME				
STREET ADDRESS				
CITY - ST - ZIP				
TITLE				<input type="checkbox"/> DELETE
NAME				
STREET ADDRESS				
CITY - ST - ZIP				
TITLE				<input type="checkbox"/> DELETE
NAME				
STREET ADDRESS				
CITY - ST - ZIP				

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	1115 N.E. Lakeview Dr.
2.4 CITY - ST - ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	111 S.E. 16TH AV. #0-304
3.4 CITY - ST - ZIP	Gainesville FL 32601
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, or on an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96

Date

941-332

Daytime Phone

CR2E034 (12/95)