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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

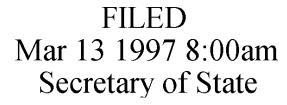
Sandra B. Mortham

Secretary of State *
DIVISION OF CORPORATIONS

DOCUMENT # K08244

(1)

WALTON ELECTRONICS INC.





Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Country Zip Country B. This corporation has liability for intengible tax under s. Tended Statutes Yes No Name and Address of Current Registered Agent WALTON, LLOYD K, 4324 SW 35 TERRACE GAINESVILLE FL 32608 B4 City FL B5 Zip City Sircet Address (F.O. Box Number is Not Acceptable) B2 Sircet Address (F.O. Box Number is Not Acceptable) B4 City FL B5 Zip City B5 Zip City B5 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TILL FTS WALTON, LLOYD K. 4324 SW 35TH TERRACE GAINESVILLE FL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TILL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TILL Changes Changes ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TILL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TILL	port lied For Applicabli ditional uired lay Be Fees 99.032,
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2. Principal Place of Business 2. Making Address 2. Making Address 2. Making Address 3. 4. FEI Number 59-2861397 59-2861397 50-28613	lied For Applicabi iditional uired lay Be Fees 99.032,
28. Mailing Address 28. Mailing Address 59-2861397	Applicabi Iditional uired lay Be Fees 99.032,
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City & State Country Added to B. This corporation has liability for intengisle ax under s. The state of Florida Statutos No. Name and Address of Now Registered Agent WALTON, LLOYD K, 4324 & W 35 TERRACE GAINESVILLE FL 32608 B4 City FL B5 Zip City F	uired lay Be Fees 99 032,
City & State 28 29 20 20 20 20 20 20 20 20 20	Fees 99.032,
Zip Country Zip Country Zip Country B. This corporation has liability for injungible tax under s. 1 28	99.032,
9, Name and Address of Current Registered Agent WALTON, LLOYD K, 4324 &W 35 TERRACE GAINESVILLE FL 32608 10. Name and Address of New Registered Agent WALTON, LLOYD K, 4324 &W 35 TERRACE GAINESVILLE FL 32608 13. Sircet Address (P.O. Box Number is Not Acceptable) 14. 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 office or registered agent, or both, in the State of Frorida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature The Company of the Company of the Corporation Submits this statement for the purpose of changing its office or registered agent, or both, in the State of Frorida Statutes. SIGNATURE Signature The Company of the Corporation's board of directors. I hereby accept the appointment as reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature The Company of the Corporation's board of directors. I hereby accept the appointment as reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature The Company of the Corporation's board of directors. I hereby accept the appointment as reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. City	
WALTON, LLOYD K, 4324 \$W 35 TERRACE GAINESVILLE FL 32808 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83	
### A24 SW 35 TERRACE GAINESVILLE FL 32808 ### City #	
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B4 City FL 85 Zip Co	
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 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 reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TITLE PTS DELETE 1.1 TITLE NAME 4324 SW 35TH TERRACE CITY-ST-ZIP GAINESVILLE FL DELETE 1.4 CITY-ST-ZIP DELETE 2.1 TITLE AMME STREET ADDRESS	
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I do hereby catifythat 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 of 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; the I am an officer or officers 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 of Block 13 if changed, or on an attachment with an address.

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MICKLEY WAS HOURS D

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