2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 07, 2006
Secretary of State

DOCUMENT# L00000016093

Entity Name: WALKER FAMILY, LLC

Current Principal Place of Business:

17221 SLATER ROAD
NORTH FORT MYERS, FL 33917

New Principal Place of Business:

Current Mailing Address:

17221 SLATER ROAD
NORTH FORT MYERS, FL 33917

New Mailing Address:

FEI Number: 65-1074200 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALKER, JAMES E
17221 SLATER ROAD
NORTH FORT MYERS, FL 33917 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	WALKER, JAMES E	
Address:	17221 SLATER RD.	
City-St-Zip:	N. FT. MYERS, FL 33917	
Title:	MGRM	( ) Delete
Name:	THOMAS, GLORIA J	
Address:	18071 SLATER RD	
City-St-Zip:	FORT MYERS, FL 33917	
Title:	MGRM	( ) Delete
Name:	WALKER, JOHNNIE T	
Address:	621 BIMINI AVE	
City-St-Zip:	MARCO ISLAND, FL 34145	
Title:	MGRM	( ) Delete
Name:	WALKER, J. ALLEN	
Address:	17131 SLATER RD	
City-St-Zip:	FORT MYERS, FL 33917	

ADDITIONS/CHANGES:

Title:	.	(X) Change ( ) Addition
Name:	WALKER, JAMES E	
Address:	17221 SLATER RD.	
City-St-Zip:	N. FT. MYERS, FL 33917	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	MGRM	(X) Change ( ) Addition
Name:	WALKER, JOHNNIE T	
Address:	6900 ANTHARIUM LANE	
City-St-Zip:	NAPLES, FL 34143	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JAMES E WALKER RA 01/07/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date