2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000013191

1. Entity Name

WALTON FAMILY INVESTMENTS, LLC

FILED
02 NOV -5 AM 11:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
12341 OAKWIND PLACE SEMINOLE FL 33772	12341 OAKWIND PLACE SEMINOLE FL 33772

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

09/25/02 90117 048 $50.00

4. FEI Number ☐ Applied For ☑ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WALTON, MARK H III 12341 OAKWIND PLACE SEMINOLE FL 33772	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 ______________________ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State
Due By September 25, 2002

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGER Mark H. Walton, III 12341 Oakwind Place Seminole, FL 33772	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Manager Deborah P. Walton 12341 Oakwind Place Seminole, FL 33772	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

11. 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 is true and accurate and that my 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.

Mark H. Walton, III

SIGNATURE: ______________________ 9/21/02 727/397-0900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

CR2E083 (4/02)

Troup & Associates, CPAs, PA
Certified Public Accountants

November 4, 2002

Florida Department of State
Division of Corporations
Annual Report Section
Post Office Box 6327
Tallahassee, Florida 32314

Re: Walton Family Investments, LLC
Document #L01000013191
2002 UBR

Dear Sir:

Per our telephone conversation of October 25, 2002, please find enclosed the completed 2002 Uniform Business Report for the captioned entity.

Your letter of September 27, 2002 is also attached for your reference.

If you have any questions or desire additional information, please advise.

Sincerely,

David L. Troup

David L. Troup
Certified Public Accountant

DLT/pp

Enclosures (2)

cc: Mark H. Walton, III

4731 Central Avenue • St. Petersburg, Florida 33713
(727) 321-3246 • Fax (727) 321-3779
Members in AICPA & FICPA