

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000014713

FILED
Feb 19, 2008
Secretary of State

Entity Name: WALKER PROPERTIES ORC, LLC

Current Principal Place of Business:

30 CARD SOUND ROAD
KEY LARGO, FL 33037

New Principal Place of Business:

Current Mailing Address:

34 WAKEFIELD AVENUE
PORT WASHINGTON, NY 11050

New Mailing Address:

FEI Number: 56-2469210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMES, TIMOTHY N ESQ.
99198 OVERSEAS HIGHWAY
SUITE 8
KEY LARGO, FL 33037 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: MGR () Delete
Name: WALKER, ETHEL M
Address: 12 SHOREVIEW ROAD
City-St-Zip: PORT WASHINGTON, NY 11050

Title: MGRM () Delete
Name: WALKER, CHARLES
Address: 34 WAKEFIELD AVE
City-St-Zip: PORT WASHINGTON, NY 11050

Title: MGRM () Delete
Name: DELUCA, SUSAN
Address: 7 HILLTOP ROAD
City-St-Zip: PORT WASHINGTON, NY 11050

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES WALKER

MR

02/19/2008

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