2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L06101

City-St-Zip:

KISSIMMEE, FL 34744

Entity Name: WALKER'S I.G.A. FOODLINER, INC

FILED Jan 30, 2009 Secretary of State

Entity Name: WALKER'S I.G.A. FOODLINER, INC.					
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
3000 LION' KISSIMMEI	S CT E, FL 34744	US	3000 LIONS COURT KISSIMMEE, FL 34744	US	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
3000 LION' KISSIMMEI	S COURT E, FL 34744	US	3000 LIONS COURT KISSIMMEE, FL 34744	US	
FEI Number:	37-1038431	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of N	Name and Address of New Registered Agent:	
WALKER, JOHN R 3000 LION'S COURT KISSIMMEE, FL 34744 US			WALKER, JOHN R 3000 LIONS COURT KISSIMMEE, FL 34744	US	
The above in the State		submits this statement for the p	urpose of changing its registered o	ffice or registered agent, or both,	
SIGNATURE:				01/30/2009	
Electronic Signature of Registered Agent			nt	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BD () WALKER, ROBI 3000 LION'S CO KISSIMMEE, FL	DURT	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	PRES () WALKER, JOHN 401 KRUEGER ORLANDO, FL	STREET	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address:	S () WALKER, SAND 3000 LION'S CO		Title: () Name: Address:	Change () Addition	

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JOHN R WALKER PRES 01/30/2009