2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 07, 2008
Secretary of State

DOCUMENT# L07000092597

Entity Name: WALKER TROPHIES & MORE, LLC

Current Principal Place of Business:

353 LOLLY LN
JACKSONVILLE, FL 32259

New Principal Place of Business:

11700 SAN JOSE BLVD
SUITE 6
JACKSONVILLE, FL 32223

Current Mailing Address:

353 LOLLY LN
JACKSONVILLE, FL 32259

New Mailing Address:

FEI Number: 26-1094957 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WALKER, DORIS L
353 LOLLY LN
JACKSONVILLE, FL 32259 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, PHILLIP
Address: 353 LOLLY LN
City-St-Zip: JACKSONVILLE, FL 32259

Title: MGRM ( ) Delete
Name: WALKER, DORIS L
Address: 353 LOLLY LN
City-St-Zip: JACKSONVILLE, FL 32259

ADDITIONS/CHANGES:

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: DORIS L WALKER MGRM 01/07/2008

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