

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L68420

(3)

1. Corporation Name

WALKER & SONS LOGGING, INC.



Principal Place of Business

C/O TIMOTHY J. WARFEL
215 S MONROE ST. #701, 1ST FLORIDA BANK BL
TALLAHASSEE FL 32301

Mailing Address

ROUTE 3 BOX 60
MONTICELLO FL 32344
US

2. Principal Place of Business

21 Jefferson Co. Hwy 254
Suite, Apt. #, etc.

2a. Mailing Address

26 Rt 3 Box 60
Suite, Apt. #, etc.

23 City & State

monticello, FL

27 City & State

monticello FL

24 Zip

32344

25 Country

Jefferson

29 Zip

32344

30 Country

Jefferson

9. Name and Address of Current Registered Agent

WARFEL, TIMOTHY J.
SUITE 701, FIRST FLORIDA BANK BLDG.
215 MONROE STREET
TALLAHASSEE FL 32301

3. Date Incorporated or Qualified

04/26/1990

3a. Date of Last Report

05/01/1995

4. FEI Number

59-3010738

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

Signature, typed or printed name of registered agent and title if applicable

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
DP	WALKER, ULYSSES	RT. 3, BOX 60	MONTICELLO FL	
DST	WALKER, FRANCES H.	RT. 3, BOX 60	MONTICELLO FL	
DV	WALKER, ROBERT DOUGLAS	RT. 3, BOX 60-A	MONTICELLO FL	
DV	WALKER, DENNIS MAXWELL	RT. 3, BOX 60	MONTICELLO FL	
DV	WALKER, RONALD PERRY	RT. 3, BOX 60	MONTICELLO FL	
DV	WALKER, WILLIAM KEVIN	RT. 3, BOX 60	MONTICELLO FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP	☒ Change ☐ Addition
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY - ST - ZIP	☐ Change ☐ Addition
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP	☒ Change ☐ Addition
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP	☐ Change ☐ Addition
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP	☐ Change ☐ Addition
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY - ST - ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Signature and typed or printed name of signing officer or director

4-22-96

342-0147

CR2E034 (12/95)