

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Jan 09, 2006
Secretary of State

DOCUMENT# N01000003630

Entity Name: WALTON COMMUNITY DEVELOPMENT, CORP.

Current Principal Place of Business:

P.O. BOX 2312
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

2395 W. CO. HWY 30A
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

P.O. BOX 2312
SANTA ROSA BEACH, FL 32459

New Mailing Address:

2395 W. CO. HWY 30A
SANTA ROSA BEACH, FL 32459

FEI Number: 59-3720487 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

POWELL, THOMAS L
908 U.S. HIGHWAY 90 WEST
DEFUNIAK SPRINGS, FL 32433 US

Name and Address of New Registered Agent:

BURTON, JOE I
2395 W. CO. HWY 30A
SANTA ROSA BEACH, FL 32459 US

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: JOSEPH I. BURTON

01/09/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TITUS, KRISS
Address: P.O. BOX 1248
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: V () Delete
Name: STAFFORD, LYN
Address: 259 CENTER AVENUE
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: YD () Delete
Name: POWELL, THOMAS
Address: 908 US HIGHWAY 90 WEST
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: D () Delete
Name: PAUL, JOEL
Address: 301 NORTH OKLAHOMA STREET
City-St-Zip: BONIFAY, FL 32425

Title: D (X) Delete
Name: MALONE, JACKIE
Address: 220 NORHT NINTH STREET
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: PD (X) Delete
Name: TEDESCO, PAMELA
Address: 63 SOUTH CENTRE TRAIL
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BURTON, JOE
Address: 2395 W. CO. HWY 30A
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D (X) Change () Addition
Name: STAFFORD, LYN
Address: 259 CENTER AVENUE
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D (X) Change () Addition
Name: LARSEN, TIANA
Address: 205 CAMPBELL ST.
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D (X) Change () Addition
Name: REYNAFARJE, LOURDES
Address: 543 SEACREST DR.
City-St-Zip: SANTA ROSA BEACH, FL 32459

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH I. BURTON

PD

01/09/2006

Electronic Signature of Signing Officer or Director

Date