2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Aug 27, 2008 8:00 am Secretary of State DOCUMENT # N05000010411 1. Entity Name 08-27-2008 90010 047 ****70.00 WALTON CARES INC. Principal Place of Business Mailing Address 2551 EAST HIGHWAY 90 PO BOX 217 DEFUNIAK SPRINGS, FL 32433 DEFUNIAK SPRINGS, FL 32435 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #. etc. 08262008 Cha-NP CR2E037 (12/06) City & State City & State Applied For 4. FEI Number 20-3528092 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name \mathcal{H})ones BONNER, KATHRYN Johnnie 2551 EAST HIGHWAY 90 Street Address (P.O. Box Number is Not Acceptable) <u>East</u> Highway DEFUNIAK SPRINGS, FL 32433 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. 8-26-08 lt Jones Sr. SIGNATURE (NOTE: PIPO) 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by September 12, 2008 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PRESIDENT TITLE Delete TITLE Change Change Addition Johnnie H. Jones SR NAME BONNER, KATHRYN É NAME 322 Spring Lake Rd 515 COLLEGE AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DEFUNIAK SPRINGS, FL 32435 CITY-ST-ZIP Defuniak Springs Fl 32433 V₽ TITLE VPD Delete TITLE Change ☐ Addition Beverley J. Warren 253 College Ave De Funiak Springs F1 32435 NAME **CUCHENS, EDWIN E** NAME STREET ADDRESS 109 CUCHENS LANE STREET ADDRESS **DEFUNIAK SPRINGS, FL 32435** CITY-ST-7IP CITY-ST-ZIP BeTTY J walters Delete SD TITLE TITLE ☐ Addition WALTERS, BETTY J NAME NAME 10 Box 1023 P.O. BOX 1023 STREET ADDRESS STREET ADDRESS DEFUNIAK SPRINGS, FL 32435 DeFuniak Springs Fl 32435 CITY-ST-ZIP CITY-ST-7IP TD TITLE Delete TITLE ■ Addition Evelyn S Jones 322 Spring Lake Rd De Funiak Springs F/ 32433 NAME WALTERS, BETTY J NAME P O BOX 1023 STREET ADDRESS STREET ADDRESS CITY-ST-ZIE DEFUNIAK SPRINGS, FL 32435 CITY-ST-ZIP TITLE ☐ Delete TITLE Addition Paul NAME NAME Joel POBOX 909 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE NAME NAME David Wilson 179 Pine Shores Rd STREET ADDRESS STREET ADDRESS

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-7IP

De Funick Springs Fl 32435

8-26-08 Janes Se

CITY-ST-ZIP

DOCUMENT # NO50000 10411

Walton Cares, Inc

ATTACHMENT 40114454

additional Directors

Craig M Thomas 4775 Co Hwy 183N De Funiak Springs F1 32433

Catherine H. Davis
PO Box 1062
De Funiak Springs F1 32435

Cindi Clark 2603 Victoria Pl Crestview Fl 32536

Bobby Beasley 51 Jackson Ave De Funiak Springs F1 32435

Kermit Wright 615 Lakeview Drive De Funiak Springs F1 32433