2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 08, 2005
Secretary of State

DOCUMENT# N92000001024

Entity Name: WALTON GUARD, INC.

Current Principal Place of Business:

C/O CHERYL HARRIS
127 MORIARITY
FORT WALTON BEACH, FL 32548 US

New Principal Place of Business:

Current Mailing Address:

C/O CHERYL HARRIS
127 MORIARITY
FORT WALTON BEACH, FL 32548 US

New Mailing Address:

FEI Number: 59-3176554 **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:

HARRIS, CHERYL
127 MORIARITY
FORT WALTON BEACH, FL 32548 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

OFFICERS AND DIRECTORS:

Title:	DT	( ) Delete
Name:	HARRIS, CHERYL	
Address:	127 MORIARITY	
City-St-Zip:	FORT WALTON BEACH, FL 32548	
Title:	DV	( ) Delete
Name:	TAYLOR, LOLA A	
Address:	128 JOHNSON CT.	
City-St-Zip:	CRESTVIEW, FL 32536	
Title:	DT	( ) Delete
Name:	HARRIS, WALTER	
Address:	127 MORIARITY	
City-St-Zip:	FORT WALTON BEACH, FL 32548	
Title:	DS	( ) Delete
Name:	LOUISE MATHIS, MARGIE	
Address:	854 TARPON DR.	
City-St-Zip:	FORT WALTON BEACH, FL 32548	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 Section 119.07(3)(i), 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: CHERYL A. HARRIS DT 08/08/2005
Electronic Signature of Signing Officer or Director — Date