

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000008317

FILED  
Jun 02, 2005  
Secretary of State

Entity Name: WALKER & TRAVIS INVESTMENTS, INC.

## Current Principal Place of Business:

4311 WHITELEAF CT.  
PENSACOLA, FL 32504

## New Principal Place of Business:

512 EVENTIDE DRIVE  
GULF BREEZE, FL 32561

## Current Mailing Address:

4311 WHITELEAF CT.  
PENSACOLA, FL 32504

## New Mailing Address:

512 EVENTIDE DRIVE  
GULF BREEZE, FL 32561

FEI Number: 59-3621361

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALKER, CRAIG DOUGLAS  
4311 WHITEFIELD CT.  
PENSACOLA, FL 32504 US

## Name and Address of New Registered Agent:

WALKER, CRAIG D  
512 EVENTIDE DRIVE  
GULF BREEZE, FL 32561 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: CRAIG D. WALKER

06/02/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WALKER, CRAIG DOUGLAS  
Address: 4311 WHITELEAF CT.  
City-St-Zip: PENSACOLA, FL 32504

Title: D ( ) Delete  
Name: WALKER, LEZLI FAY  
Address: 4311 WHITELEAF CT.  
City-St-Zip: PENSACOLA, FL 32504

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WALKER, CRAIG D  
Address: 512 EVENTIDE DRIVE  
City-St-Zip: GULF BREEZE, FL 32561

Title: VP (X) Change ( ) Addition  
Name: WALKER, LEZLI FAY  
Address: 512 EVENTIDE DRIVE  
City-St-Zip: GULF BREEZE, FL 32561

Title: SEC ( ) Change (X) Addition  
Name: HOGUE, JEFFREY A  
Address: 820 N. BARCELONA ST.  
City-St-Zip: PENSACOLA, FL 32501

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

SIGNATURE: CRAIG D. WALKER

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06/02/2005

Electronic Signature of Signing Officer or Director

Date