2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P00000008317 DOCUMENT

1. Entity Name

WALKER & TRAVIS INVESTMENTS, INC.



FILED Feb 12, 2003 8:00 am Secretary of State

02-12-2003 90135 026 ***150.00

				\	GOD WE TO						
Principal Place of Business 4350 IRONGATE RD PENSACOLA FL 32504		4350	- Mailing Address 4350 IRONGATE RD PENSACOLA FL 32504					### ## ###############################			
9 Principal Di	ace of Business	. a Mai	ling Address								
	Whiteleaf Ct.	I .	4311 Whitelest Ct.								
Suite, Apt.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State)	City	& State			4. F	El Number 59-3621361	<u></u>	Ar	oplied For	
Pensa	roola, FL		Pensacia, FL				39-302 130 1			ot Applicable	
Zip 32504	Country	Zip	2504	Country USA		5. C	Certificate of Status Desired		8.75 Add ee Require		
3-(30-)	6. Name and Address of Curre					7. N	ame and Address of New F	Registered Ag	ent		
				١	lame	lalalka	c Coula N			İ	
WALKER, CRAIG DOUGLAS			Street Addres			ress (P.O. Bo	Walker, Craig D. s (P.O. Box Number is Not Acceptable)				
4350 IRON	IGATE RD					4311	4311 Whiteleaf Ct				
PENSACO	LA FL 32504										
						City Pensawla			FL Zip Code 32 50 4		
8. The above	named entity submits this statement ions of positionered agent.	for the purp	oose of changing its	registered o	office or re	gistered age	ent, or both, in the State of Fl	orida. I am far	niliar with,	and accept	
A STATE OF IGHT	0 11	406.	~ -0	كمرأ بالمراك	lea +) link			
SIĞNATURE .	Signature, typed or unted name of registered age	ent and title if ap	plicable. (NOTE	:: Registered Age	ent signature r	required when re	instating)	DAT	') 		
After	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.0 Payable to Florida Department						Election Campaign Fi Trust Fund Contribution			00 May Be d to Fees	
	OFFICERS AN)DS	11.		AD	DITIONS/CHANGES TO OF	FICERS AND D	DIRECTOR	S IN 11	
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CITY-ST-ZIP	PENSACOLA FL 32504			CITY-ST-	ZIP	Pensacol	a, FL 32504				
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NAME				NAME		•					
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STREET ADDRESS	4			STREET A	DDRESS						
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CITY-ST-ZIP				CITY-ST-			440.07(0\(0\) File \(0\) - 0 - 1 \(0\)	The section is a second	£. +b.a+ +b	information	
l indicated	pertify that the information supplied v on this report or supplemental repor poration or the receiver or trustee en	t is trua and	l accurate and that m	ny sionature	shall hav	e the same i	legal effect as it mage unger	oain: inat i an	n an oilicei	r or director i	

SIGNATURE: X