

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 13, 2001 8:00 am
Secretary of State

09-13-2001 90007 046 ***150.00

DOCUMENT # P00000083266

1. Entity Name
WALTON TELE-SERVICES, INC.

Principal Place of Business Mailing Address
403 47TH ST W 403 47TH ST W
BRADENTON FL 34209 BRADENTON FL 34209

2. Principal Place of Business
410 Cortez Rd. West
 Suite, Apt. #, etc.
202

3. Mailing Address
 Suite, Apt. #, etc.

City & State
Bradenton, FL
 Zip
34207 Country
MANATEE

City & State
 Zip Country

4. FEI Number
65-1015025

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

LEE, RICHARD V
403 47TH ST W
BRADENTON FL 34209

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
234 MANATEE AVENUE EAST
 City **BRADENTON** **FL** Zip Code **34208**

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.

SIGNATURE Michael B Walton Michael B Walton 9/101
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALTON, MICHAEL B 403 47TH ST W BRADENTON FL 34209	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

SIGNATURE: Michael B Walton Michael B Walton 9/101 (941)753-9540
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)

Attachment
978455-
#P00000083266

9/8/01

To Whom it May Concern;

Walton Tele-services Never
Recieved Any Correspondance
From the State between
January & March. This is
our First Filing of Uniform
Business Report. We would
Not be late if we had
recieved Notification, please
Waive the late Fee & Accept
our payment. Our Address
has Not Changed. This is
the only Correspondance we
have received

Thank you

Michael B Walton

our EIN #'s 65 101 5025