

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000094881

FILED
Apr 20, 2004
Secretary of State

Entity Name: WALTON HOME BUILDERS, INC.

Current Principal Place of Business:

288 LAKEVIEW DR.
SEAGROVE BEACH, FL 32459

New Principal Place of Business:

348 E. PINWOOD LN
PANAMA CITY BEACH, FL 32413

Current Mailing Address:

P.O. BOX 611478
ROSEMARY BEACH, FL 32461

New Mailing Address:

FEI Number: 59-3751128 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, THOMAS C
288 LAKEVIEW DR.
SANTA ROSA, FL 32459 US

Name and Address of New Registered Agent:

ANDERSON, THOMAS C
348 E. PINWOOD LN
PANAMA CITY BEACH, FL 32413 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: THOMAS C. ANDERSON

04/20/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPTD () Delete
Name: ANDERSON, THOMAS C
Address: 288 LAKEVIEW DR.
City-St-Zip: SEAGROVE BEACH, FL 32459

Title: VPSD () Delete
Name: ANDERSON, ADAM T
Address: 152 SEACREST DR.
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: VP () Delete
Name: ANDERSON, HEATHER G
Address: 152 SEACREST DR
City-St-Zip: PANAMA CITY BEACH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPTD (X) Change () Addition
Name: ANDERSON, THOMAS C
Address: 248 E. PINWOOD LN.
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: VPSD (X) Change () Addition
Name: ANDERSON, ADAM T
Address: 248 E. PINWOOD LN.
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: VP (X) Change () Addition
Name: ANDERSON, HEATHER G
Address: 248 E. PINWOOD LN.
City-St-Zip: PANAMA CITY BEACH, FL 32413

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: THOMAS C. ANDERSON

PRES

04/20/2004

Electronic Signature of Signing Officer or Director

Date