

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Feb 15, 2005 8:00 am
Secretary of State

02-15-2005 90022 033 ***158.75

DOCUMENT # P04000067017

1. Entity Name
J.M. WALTERS ENTERPRISES, INC.



Principal Place of Business
2805 S.W. ELIM CHURCH ROAD
FT WHITE, FL 32038

Mailing Address
2805 S.W. ELIM CHURCH ROAD
FT WHITE, FL 32038

50015468



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01062005

Chg-P

CR2E034 (10/03)

4. FEI Number

20-1040605

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WALTERS, JACK M
2805 S.W. ELIM CHURCH ROAD
FT WHITE, FL 32038

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	WALTERS, JACK M	
STREET ADDRESS	2805 S.W. ELIM CHURCH ROAD	
CITY-ST-ZIP	FT WHITE, FL 32038	
TITLE	VPST	<input type="checkbox"/> Delete
NAME	WALTERS, ALANNA K	
STREET ADDRESS	2805 S.W. ELIM CHURCH ROAD	
CITY-ST-ZIP	FT WHITE, FL 32038	
TITLE		<input type="checkbox"/> Delete
NAME		
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.