

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000113449

1. Entity Name
WALKER & SON PRESSURE CLEANING AND PAINTING, INC.



Principal Place of Business 80 WALKER LANE LAKE PLACID, FL 33852	Mailing Address 80 WALKER LANE LAKE PLACID, FL 33852
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DO NOT WRITE IN THIS SPACE

FILED

06 AUG -2 PH 3: 53

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



07272006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1543305	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BOULOS, FELECIA
 12767 TURTLE LAKE LANE
 JACKSONVILLE, FL 32246**

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$550.00
 Due by September 8, 2006**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALKER, LARRY O 80 WALKER LANE LAKE PLACID, FL 33852
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALKER, LARRY O JR. 80 WALKER LANE LAKE PLACID, FL 33852
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALKER, SHERRY A 80 WALKER LANE LAKE PLACID, FL 33852
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

400078380774
 08/04/06--01043--023 **150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: Sherry A Walker 07/26/06 863-4654210

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

28/3



FLORIDA DEPARTMENT OF STATE
 Secretary of State
 Sue M. Cobb
 DIVISION OF CORPORATIONS
 P.O. Box 6327
 Tallahassee, Florida 32314

First-Class Mail
 U.S. Postage
PAID
 State of Florida
 84321

NOTICE OF INTENT TO DISSOLVE

0293988 01 AT 0.193 **AUTO T2 0 1203 33852-719280



WALKER & SON PRESSURE CLEANING AND PAINTING,
 INC.
 80 WALKER LANE
 LAKE PLACID FL 33852-7192

Dear Sir,
 This is the only notice that
 I received. Thank-you

*** DO NOT SEND A CHECK WITH THE POSTCARD, IT WILL DELAY PROCESSING ***

OPTION 3 - Receive a form by mail - Allow up to 28 days total processing time.

- Detach this postcard.
- Enter address to mail report to, if different from preprinted address.
- Affix postage on reverse side and mail.

Document #

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WALKER & SON PRESSURE CLEANING AND PAINTING,
 INC.
 80 WALKER LANE
 LAKE PLACID FL 33852-7192

Note: This is not a change
 to the address of record.



2006
 CR2E095 - 2nd 4/06

TO OPEN: FOLD AND TEAR ALONG PERFORATION, THEN PULL APART.