2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000155450

FILED Apr 28, 2006 Secretary of State

Entity Name: TIDEWATERS DEVELOPMENT OF WALTON, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	CES FERRY RI , GA 30305	O SUITE 450		
Current Mailing Address:		New Mailing Address:		
	CES FERRY RI , GA 30305	O SUITE 450		
El Number	: 20-3844218	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:
215 GRÁN	1 TODD ESQ ID BLVD SUITI			
DESTIN, F	FL 32550 U	S		
he above	FL 32550 U		ourpose of changing its registere	ed office or registered agent, or both,
he above	FL 32550 U named entity se of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
he above the State	FL 32550 U named entitys e of Florida. RE:			ed office or registered agent, or both, Date
The above the State	named entity se of Florida. RE: Electror	submits this statement for the p		
The above the State SIGNATUI	named entity se of Florida. RE: Electror	submits this statement for the pair is statement for the pair is statement for the pair is submitted. Against Fund Contribution ().	ent	
The above in the State SIGNATUI SIGNATUI SIECTION Care DFFICER SIECTION CARE SIECTION	e named entity se of Florida. RE: Electror mpaign Financing S AND DIREC DP () TUCKER, JEFF	submits this statement for the particle Signature of Registered Aggrust Fund Contribution (). TORS: Delete REY S FERRY RD SUITE 450	ent	Date
The above the State SIGNATUI	e named entity se of Florida. RE: Electror mpaign Financing S AND DIREC DP () TUCKER, JEFF 255 E PACES F ATLANTA, GA	submits this statement for the partic Signature of Registered Agranter Fund Contribution (). TORS: Delete REY S FERRY RD SUITE 450 30305 Delete IS TREE RD	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JEFFREY TUCKER DP 04/28/2006