

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000090824

1. Entity Name
ROBERT S. WALTON, III, P.A.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 SEP -2 PM 4:03

Principal Place of Business
2429 CENTRAL AVENUE
SUITE 204
ST. PETERSBURG, FL 33713 US

Mailing Address
P.O. BOX 920
ST. PETERSBURG, FL 33731 US



2. Principal Place of Business - No P.O. Box #
1305 WOODGATE WAY
Suite, Apt. #, etc.

3. Mailing Address
1305 WOODGATE WAY
Suite, Apt. #, etc.

City & State
TALLAHASSEE FL

City & State
TALLAHASSEE FL

Zip
32308

Country
LEON

Zip
32308

Country
LEON

09022008 Chg-P CR2E034 (12/06)

4. FEI Number
20-5160181

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SEGRAVES, LAURIE
4300 GOLF ISLAND DRIVE #2D
NAPLES, FL 34112

7. Name and Address of New Registered Agent

Name
ROBERT S. WALTON
Street Address (P.O. Box Number is Not Acceptable)
1305 WOODGATE WAY
City
TALLAHASSEE FL Zip Code
32308

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]

9-2-08

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
Due by September 12, 2008**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
P
WALTON, ROBERT S III
STREET ADDRESS
2429 CENTRAL AVENUE
CITY - ST - ZIP
ST. PETERSBURG, FL 33713 ☐ Delete

TITLE
NAME
DIRE
WALTON, AVON A DIRECTO
STREET ADDRESS
2429 CENTRAL AVENUE
CITY - ST - ZIP
ST. PETERSBURG, FL 33713 ☐ Delete

TITLE
NAME

STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
NAME

STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
NAME

STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
NAME

STREET ADDRESS
CITY - ST - ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition
400135963704
09/16/08--01019--024 **150.00

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
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CITY - ST - ZIP ☐ Change ☐ Addition

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CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition
B 9/2/08

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:

[Signature]

ROBERT S. WALTON, III PRESIDENT

9-2-08 813-842-2800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #