

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000127383

Entity Name: WALTERS & BURKE TRUCKING, INC

FILED  
Feb 01, 2007  
Secretary of State

## Current Principal Place of Business:

2531 OTTIS AVE  
DELTONA, FL 32738

## New Principal Place of Business:

## Current Mailing Address:

2531 OTTIS AVE  
DELTONA, FL 32738

## New Mailing Address:

FEI Number: 20-5703946

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALTERS, ROSE  
2531 OTTIS AVE  
DELTONA, FL 32738 US

## Name and Address of New Registered Agent:

WALTERS, MARIE  
2531 OTTIS AVE  
DELTONA, FL 32738 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: RA

02/01/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WALTERS, ROSE  
Address: 2531 OTTIS AVE  
City-St-Zip: DELTONA, FL 32738

Title: V ( ) Delete  
Name: BURKE, LORRAINE  
Address: 2531 OTTIS AVE  
City-St-Zip: DELTONA, FL 32738

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WALTERS, MARIE  
Address: 2531 OTTIS AVE  
City-St-Zip: DELTONA, FL 32738

Title: VP (X) Change ( ) Addition  
Name: BURKE, LORRAINE  
Address: 2531 OTTIS AVE  
City-St-Zip: DELTONA, FL 32738

Title: VP ( ) Change (X) Addition  
Name: WALTERS, RONALD  
Address: 2531 OTTIS AVE  
City-St-Zip: DELTONA, FL 32738

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: MARIE WALTERS

P

02/01/2007

Electronic Signature of Signing Officer or Director

Date