

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000080157

Entity Name: EM WALKER DRYWALL INC

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

504 HAMLET DRIVE  
PORT ORANGE, FL 32127 US

**New Principal Place of Business:**

151 SOUTH COREY DTIVE  
EDGEWATER, FL 32141 US

**Current Mailing Address:**

504 HAMLET DRIVE  
PORT ORANGE, FL 32127 US

**New Mailing Address:**

151 SOUTH COREY DTIVE  
EDGEWATER, FL 32141 US

FEI Number: 27-3577838

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DEVORE, ROSA L  
2428 SOUTH MAPLE AVENUE  
SANFORD, FL 32771 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P/T  
Name: WALKER, MICHAEL E  
Address: 151 SOUTH COREY DRIVE  
City-St-Zip: EDGEWATER, FL 32141 US

Title: VP  
Name: RIZZA, SEBASTIN  
Address: 3411 TAMARIND DRIVE  
City-St-Zip: EDGEWATER, FL 32141 US

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL E WALKER

P/T

04/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date