2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2005 08:00 AM
Secretary of State

DOCUMENT # P22585

1. Entity Name
WALTER INDUSTRIES, INC.

Principal Place of Business	Mailing Address
4211 W BOY SCOUT BLVD SUITE 1000 TAMPA, FL 33607 US	4211 W BOY SCOUT BLVD TAX DEPT SUITE 1000 TAMPA, FL 33607 US

01042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-3429953
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PCED
NAME	DEFOSSET, DONALD JR
STREET ADDRESS	4211 W BOY SCOUT BLVD
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	AC
NAME	EISCH, CYNTHIA B
STREET ADDRESS	4211 W BOY SCOUT BLVD
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	S
NAME	PATRICK, VICTOR P
STREET ADDRESS	4211 W. BOY SCOUT BLVD.
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	D
NAME	TOKARZ, MICHAEL T
STREET ADDRESS	9 WEST 57TH ST
CITY-ST-ZIP	NEW YORK, NY 33607
TITLE	D
NAME	GOLKIN, PERRY
STREET ADDRESS	9 WEST 57TH ST.
CITY-ST-ZIP	NEW YORK, NY
TITLE	VT
NAME	DEARDEN, MILES C III
STREET ADDRESS	4211 W. BOY SCOUT BLVD.
CITY-ST-ZIP	TAMPA, FL 33607

U00000243168
02/25/05-80028-017 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: WALTER INDUSTRIES, INC. By Cynthia B. Eisch Asst.Controller & Director of Taxes 2/15/2005 (813)871-4066
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #