

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90095 018 ***150.00

0662458

DOCUMENT # P93000022317

1. Corporation Name
FRIEND & WALKER, INC.

Principal Place of Business
1300 N WESTSHORE BLVD
SUITE 140
TAMPA FL 33607-4618

Mailing Address
1300 N WESTSHORE BLVD
SUITE 140
TAMPA FL 33607-4618

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/25/1993

4. FEI Number
59-3172441

Applied For
Not Applicable

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

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

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 110 S. Hoover Blvd.

Suite, Apt. #, etc. 125

22 City & State TAMPA FL

23 Zip 33609 Country

24 33609 25

2a. Mailing Address

26 110 S. Hoover Blvd

Suite, Apt. #, etc. 125

27 City & State TAMPA FL

28 Zip 33609 Country

29 33609 30

9. Name and Address of Current Registered Agent

FRIEND, JED
1300 N WESTSHORE BLVD
SUITE 140
TAMPA FL 33607-4618

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 110 S. Hoover Blvd. Suite 125

84 City TAMPA

FL

85 Zip Code 33609

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME FRIEND, JED
STREET ADDRESS 1300 N WESTSHORE BLVD SUITE 140
CITY-ST-ZIP TAMPA FL 33607-4618

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 110 S. Hoover Blvd. Suite 125
1.4 CITY-ST-ZIP TAMPA, FL 33609

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)