


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2007 08:00 A
Secretary of State

DOCUMENT # P93000077111 1. Entity Name WALTON PROPERTIES AND CONSTRUCTION, INC.					
Principal Place of Business 701 ANCHORS STREET FT. WALTON BEACH FL 32548			Mailing Address 701 ANCHORS STREET FT. WALTON BEACH FL 32548		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-3240715	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent SMITH, GEORGE R 701 ANCHORS STREET FT. WALTON BEACH FL 32548				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)					
DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State					
9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P <input type="checkbox"/> Delete SMITH, GEORGE R 701 ANCHORS STREET FT. WALTON BEACH FL				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST <input type="checkbox"/> Delete SMITH, REBECCA B 11 SLEEPY HOLLOW MARY ESTHER FL				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V <input type="checkbox"/> Delete SMITH, ROBERT V. 4090 DRIFTING SAND TRAIL DESTIN FL				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V <input type="checkbox"/> Delete SMITH, JAMES R 522 BEACH DRIVE DESTIN FL				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
<input type="checkbox"/> Change <input type="checkbox"/> Addition U00000652155 03/12/07-80007-007 150.00					
<input type="checkbox"/> Change <input type="checkbox"/> Addition					
<input type="checkbox"/> Change <input type="checkbox"/> Addition					
<input type="checkbox"/> Change <input type="checkbox"/> Addition					
<input type="checkbox"/> Change <input type="checkbox"/> Addition					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George R. Smith

Date

1/23/07

Daytime Phone #

850-244-3330