

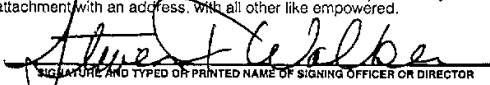


Apr 01
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**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P94000000334		
1. Entity Name WALKER REALTY OF NORTH FLORIDA, INC.		
Principal Place of Business 5810 S.W 122ND LANE MICANOPY, FL 32667	Mailing Address 5810 S.W 122ND LANE MICANOPY, FL 32667	
DO NOT WRITE IN THIS SPACE		
		03262005 No Chg-P CR2E034 (10/03)
4. FEI Number 59-3222076		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
WALKER, STEVEN T 5810 S.W 122ND LANE MICANOPY, FL 32667		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 _____ <small>Signature, typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		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	D WALKER, STEVEN T 5810 S.W. 122 LANE MICANOPY, FL 32667	DO NOT WRITE IN THIS SPACE
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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: 		3/26/05 352-345-0092