

**2008 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



04052008 No Chg-P CR2E034 (11/05)

4. FEI Number

59-3222076

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

U00000894700  
04/24/08-80036-025 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WALKER, STEVEN T
STREET ADDRESS	5810 S.W. 122 LANE
CITY-ST-ZIP	MICANOPY, FL 32667
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:

*Steven T Walker*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/08 352-345-0092