


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # P94000001667	
1. Entity Name M. WALKER, D.D.S., P.A.	

Principal Place of Business 2814 WEST MARTIN LUTHER KING TAMPA, FL 33607 US	Mailing Address P O BOX 270757 TAMPA, FL 33688-0757 US
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DO NOT WRITE IN THIS SPACE



02022006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3199534

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

6. Name and Address of Current Registered Agent

WALKER, MICHAEL J DDS
16131 CARDEN DR
ODESSA, FL 33556

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 as the obligations of registered agent.

SIGNATURE  DATE 3/26/06

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WALKER, MICHAEL J DDS 2814 W. MARTIN LUTHER KING BLVD. TAMPA, FL 33607
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04/18/06-80029-008 150.00

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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE 3/26/06 813 9601