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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

1. Corporation Name

P95000020325 (3)

WALKER AND WARD, INC.

Principal Place of Business Mailing Address 5285 RED BUG LAKE RD. 5285 RED BUG LAKE RD #121 WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708

## **FILED** Apr 23 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/09/1995 2. Principal Place of Business 2a. Mailing Address Applied For 59-3305997 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible ☐ No Personal Property Tax due June 30. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent DICKERMAN, PAMELA W SARO 186-E MAITLAND AVE Street Address (P.O. Box Number is Not Acceptable) 82 NAME Ch **ALTAMONTE SPRINGS FL 32701** В3 **PAINT** 84 Zip Code City 85 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. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change \_\_\_ Addition DELETE 1.1 TITLE TITLE WALKER, JOYCE NAME 1.2 NAME CR2E034 **302 E JERSEY ST** STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32806 CITY-ST-ZIP 1.4 CITY - ST- 7IP Change Addition DELETE 2.1 TITLE TITLE DICKERMAN, PAMELA W Housead, Pansla W. NAME 2.2 NAME 186-E MAITLAND AVE 2.3 STREET ADDRESS STREET ADDRESS ALTAMONTE SPRINGS FL 32701 2. 4 CITY - ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - 7(P CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE MAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE 61 101 E TITLE NAME 6.2 NAME STREET ADDRESS 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.