

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000038144

Entity Name: M.C. WALTERS, P.A.

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

900 VIRGINIA AVE
SUITE 5
FT. PIERCE, FL 34982 US

New Principal Place of Business:

962 SW BAYSHORE BLVD
PORT SAINT LUCIE, FL 34983 US

Current Mailing Address:

900 VIRGINIA AVE
SUITE 5
FT. PIERCE, FL 34982 US

New Mailing Address:

962 SW BAYSHORE BLVD
PORT SAINT LUCIE, FL 34983 US

FEI Number: 65-0581118

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALTERS, MARK C
900 VIRGINIA AVE.
STE #5
FORT PIERCE, FL 34982 US

Name and Address of New Registered Agent:

WALTERS, MARK C
962 SW BAYSHORE BLVD
PORT SAINT LUCIE, FL 34983 US

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.

SIGNATURE:

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: WALTERS, MARK C
Address: 900 VIRGINIA AVE., STE. 5
City-St-Zip: FT PIERCE, FL 34982

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: WALTERS, MARK C
Address: 962 SW BAYSHORE BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34983

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK C WALTERS

DPST

04/16/2009

Electronic Signature of Signing Officer or Director

Date