

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000043094

Entity Name: WAL - ROSE, INC.

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

3848 MOORES STATION RD  
SANFORD, FL 32773 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 728  
SANFORD, FL 32772 US

**New Mailing Address:**

FEI Number: 59-3317838

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WHARTON, MARGARET A  
456 S CENTRAL AVE  
OVIEDO, FL 32765 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GRIFFITH, W DUANE  
Address: 1265 TALL PINES DRIVE  
City-St-Zip: OSTEEN, FL 32764 US

Title: ST  
Name: GRIFFITH, MELINDA  
Address: 1265 TALL PINES DRIVE  
City-St-Zip: OSTEEN, FL 32764 US

I hereby 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 all other like empowered.

SIGNATURE: W. DUANE GRIFFITH

PRES

04/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date