

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000092470 (0)

1. Corporation Name

WALKER LANDSCAPE SERVICES, INC.



Principal Place of Business

Mailing Address

6227 NW 53RD BLVD MILLHOPPER RD  
GAINESVILLE FL 32653

6227 NW 53RD BLVD MILLHOPPER RD  
GAINESVILLE FL 32653

3. Date Incorporated or Qualified

12/01/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 6227 MILLHOPPER ROAD

26 6227 MILLHOPPER ROAD

4. FEI Number

59-3348108

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

City & State

City & State

23 G'VILLE, FL

28 G'VILLE, FL

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

24 32653-3129

25 ALACHUA

29 32653-3129

30 ALACHUA

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WALKER, PAUL D  
6227 NW 53RD BLVD  
GAINESVILLE FL 32653

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and date of filing

Signature, typed or printed name of registered agent and date of filing

4/25/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

PAUL WALKER

☐ DELETE

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

PRESIDENT  
PAUL WALKER  
6227 MILLHOPPER ROAD 3129  
G'VILLE, FL 32653-3129

☐ DELETE

2. TITLE  
2. NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

SECRETARY OF TREASURY  
JOAN WALKER  
6227 MILLHOPPER RD  
G'VILLE, FL 32653-3129

☐ DELETE

3. TITLE  
3. NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

4. TITLE  
4. NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

5. TITLE  
5. NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

6. TITLE  
6. NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Signature and typed or printed name of signing officer or director

PAUL WALKER

4/18/96 (352) 373-6498

CR2E034 (12/95)