

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000092980

Entity Name: WALKING T FARMS, INC.

FILED
Apr 27, 2004
Secretary of State

Current Principal Place of Business:

1805 SE 24TH STREET
HIGH SPRINGS, FL 32643

New Principal Place of Business:

15337 N W 214TH TERRACE
HIGH SPRINGS, FL 32643

Current Mailing Address:

1805 SE 24TH STREET
HIGH SPRINGS, FL 32643

New Mailing Address:

15337 N W 214TH TERRACE
HIGH SPRINGS, FL 32643

FEI Number: 59-3358445

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRAVIS, DRU
1805 SE 24TH STREET
HIGH SPRINGS, FL 32643 US

Name and Address of New Registered Agent:

TRAVIS, DRU
15337 N W 214TH TERRACE
HIGH SPRINGS, FL 32643 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: DRU TRAVIS

04/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TRAVIS, DRU
Address: 1805 S E 24TH STREET
City-St-Zip: HIGH SPRINGS,, FL 32643

Title: V () Delete
Name: TRAVIS, STEVEN L
Address: 1805 S E 24TH STREET
City-St-Zip: HIGH SPRINGS, FL 32643

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TRAVIS, DRU
Address: 15337 N W 214TH TERRACE
City-St-Zip: HIGH SPRINGS,, FL 32643

Title: V (X) Change () Addition
Name: TRAVIS, STEVEN L
Address: 15337 N W 214TH TERRACE
City-St-Zip: HIGH SPRINGS, FL 32643

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DRU TRAVIS

PRES

04/27/2004

Electronic Signature of Signing Officer or Director

Date