

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED

97 AUG 21 AM 8:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000086466 (5)

1. Corporation Name

HOLDEN WALKER CORPORATION



Principal Place of Business

4227-B ARNOLD AVE  
NAPLES FL 34104

Mailing Address

4227-B ARNOLD AVE  
NAPLES FL 34104

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

10/18/1996

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30 34101-82070

2a. Mailing Address

26 POBOX 8207  
Suite, Apt. #, etc.

27 City & State

28 NAPLES FLORIDA

29 Zip Country

9. Name and Address of Current Registered Agent

RETALICK, DONALD L III  
4227-B ARNOLD AVE  
NAPLES FL 34104

10. Name and Address of New Registered Agent

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 title if applicable.

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME RETALICK, DONALD L  
STREET ADDRESS 4227-B ARNOLD AVE  
CITY-ST-ZIP NAPLES FL 34104

TITLE D ☐ DELETE

NAME RETALICK, DONALD L  
STREET ADDRESS 4227-B ARNOLD AVE  
CITY-ST-ZIP NAPLES FL 34104

TITLE D ☐ DELETE

NAME RETALICK, KIMBERLY  
STREET ADDRESS 4227-B ARNOLD AVE  
CITY-ST-ZIP NAPLES FL 34104

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME 300002279123-7

13 STREET ADDRESS -08/27/97-01114-013

14 CITY-ST-ZIP \*\*\*\*\*165.00 \*\*\*\*\*165.00

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do 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 in an attachment with an address.

SIGNATURE: Kimberly Retallick

11 AUG 97 01141235

CR2E034 (4/97)

# HOLDEN WALKER CORPORATION MEDICAL TECHNOLOGY DIVISION

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11 AUGUST 1997

SANDRA B MORTHAM, SECRETARY OF STATE DIVISION OF CORPORATIONS  
FLORIDA DEPARTMENT OF STATE  
POST OFFICE BOX 6327  
TALLAHASSEE FLORIDA 32314

RE: 59-3412735, HOLDEN WALKER CORP, Notice received 8/8/97.

DEAR MS. MORTHAM:

In response to the recent notice, dated 8 August 1997.

This was the first request for information we had received. The Postal Carrier personally handed the Report to Office Staff when he delivered a package addressed to Lewis & Pearce. We believe this was the only reason why the report was received.

The official mailing address is Post Office Box 8207 Naples Florida 34101-8207. This address was identified on the original documentation submitted in the Articles of Incorporation.

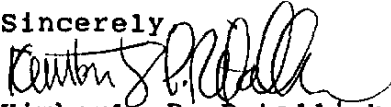
Both Lewis & Pearce Corp. and Holden Walker Corp. currently have representatives at 4227 Arnold Avenue Ste. B Naples Florida. Lewis & Pearce did receive an Annual Report which was submitted promptly.

In attempt to resolve this matter timely, I contacted the telephone number identified on the back of the report packet. I was advised to document my position and remit the \$ 165.00 filing fee.

Enclosed is a check for the original filing fee and the corporate report. I do not believe we should be responsible for any late fees subsequent to another persons error.

If you have questions or comments, please direct them to our office or via telephone.

Sincerely

  
Kimberly P. Retallick,  
Director.

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3661 Arnold Avenue, P.O. BOX 8207, Naples FL 34101-8207

(941)-649-1205 (941)-649-8191 Fax