

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000000848

FILED
Apr 25, 2006
Secretary of State

Entity Name: ART WALKER CONSTRUCTION, INC.

Current Principal Place of Business:

2889 NW 63RD STREET
OCALA, FL 34479

New Principal Place of Business:

2889 NW 63RD STREET
OCALA, FL 34475

Current Mailing Address:

P.O. BOX 267
LOWELL, FL 32663 US

New Mailing Address:

FEI Number: 59-3417034 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, ART
2889 NW 63RD STREET
OCALA, FL 34479 US

Name and Address of New Registered Agent:

WALKER, ART
2889 NW 63RD STREET
OCALA, FL 34475 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: _____

04/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDT () Delete
Name: WALKER, ART
Address: 2889 NW 63RD STREET
City-St-Zip: Ocala, FL 32663

Title: V () Delete
Name: HARRELL, DAVID
Address: 2889 NW 63RD ST
City-St-Zip: Ocala, FL 32663

Title: S () Delete
Name: WALKER, HELEN A
Address: 2889 NW 63RD ST
City-St-Zip: Ocala, FL 32663

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change () Addition
Name: WALKER, ART
Address: 2889 NW 63RD STREET
City-St-Zip: Ocala, FL 34475

Title: V (X) Change () Addition
Name: HARRELL, DAVID
Address: 2889 NW 63RD ST
City-St-Zip: Ocala, FL 34475

Title: T (X) Change () Addition
Name: WALKER, HELEN
Address: 2889 NW 63RD ST
City-St-Zip: Ocala, FL 34475

Title: S () Change (X) Addition
Name: WALKER, TARRAH
Address: 2889 NW 63RD ST
City-St-Zip: Ocala, FL 34475

I hereby certify that the information supplied with this filing does not qualify for the 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: TARRAH WALKER

S

04/25/2006

Electronic Signature of Signing Officer or Director

Date