

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000028981

1. Corporation Name
WALTON LANE, INC.

Principal Place of Business
O WHALTON LANE
KEY WEST FL 33040

Mailing Address
O WHALTON LANE
KEY WEST FL 33040

FILED
Jun 10, 1999 8:00 am
Secretary of State

06-10-1999 90002 017 *****8.75

06-10-1999 90002 018 ***150.00



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 P.O. Box 381

Suite, Apt. #, etc.

27 City & State

28 SUMMERLAND KEY, FL

29 Zip Country

30 33042-0381

3. Date Incorporated or Qualified

03/31/1997

4. FEI Number

65-0742268

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

BROWNING, MICHAEL L
402 APPELROUTH LANE
KEY WEST FL 33040

10. Name and Address of New Registered Agent

81 Name
PETER L. ROSASCO, JR.

82 Street Address (P.O. Box Number is Not Acceptable)
25000 OVERSEAS HIGHWAY

83 P.O. Box 381

84 City SUMMERLAND KEY FL

85 Zip Code 33042

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

PETER L. ROSASCO, JR.

4-13-99

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME KRUMEL, CHARLES
STREET ADDRESS 1010 FLEMING STREET
CITY-ST-ZIP KEY WEST FL 33040

☐ DELETE

TITLE D
NAME KRUMEL, LINDA
STREET ADDRESS 1010 FLEMING STREET
CITY-ST-ZIP KEY WEST FL 33040

☐ DELETE

TITLE D
NAME ROSASCO, PETER
STREET ADDRESS 24800 OVERSEAS HIGHWAY
CITY-ST-ZIP SUMMERLAND KEY FL 33042

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change

☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change

☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. I 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-13-99 (305) 745-4077

CR2E034 (11/98)