**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000065275

1. Corporation Name

WALTON INVESTMENTS, INC.

## Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90084 045 \*\*\*150.00



								AU V			LARI ALL LARI
Principal Place of Business Mailing Address								#1+0 u	****		
3200 NORTH WICKHAM ROAD #2 3200 NORTH WICKHAM ROAD											
MELBOURNE FL 32935			MELBOURNE FL 32935				DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualifed		JEACE.		<del></del> 1
							07/25/1997		<del></del> .	·+	
2. Principal Place of Business			2a. Mailing Address				4. FEI Number		L	App	lied For
21			26				59-3463598				Applicable
Suite, Apt. #, etc. 22			Suite, Apt. #, etc.				5. Certificate of Status Desired ,			<b>75</b> Ade Req	dditional uired
City & State			City & State				6. Election Campaign Financing		\$5.	4 <b>00</b> .	May Be
23			28				Trust Fund Contribution			ded to	
Zip	Country	Zij	Zip Country				8. This corporation owes the current year Intangible				
24	25 29 30			30	Personal Property Tax.			☐ Yes ☐ No			
	9. Name and Address of Curr	ent Registere	ed Agent				10. Name and Address of New Registe	ed A	gent		
	o.w			8	81 Name						
WALTERS, G W 3200 NORTH WICKHAM ROAD #2				8:	2	Street Addres	ss (P.O. Box Number is Not Acceptable)				
MELBOURNE FL 32935											
MEL	DOURNE PE 32933			8:	3						
				8-	4	City		- <u>-</u> -	85	Zip Ci	ode
11 Pursuant	to the provisions of Sections 607.0	502 and 607.1	1508 Florida Statute	es, the abor	ve-	-named corpor	ration cultimite this statement for the nurnes	n to a	 hangin	o its r	egistered
office or re agent. I a	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. S gations of, Se	Such change was at ction 607.0505, Flor	ithorized b ida Statute	y tl s.	he corporation	i's board of directors. I hereby accept the a	point	tment a	is regi	istered
SIGNATURE											
	Stgnature, typed or printed name of registered a		<del></del>		ent :	signature required v			0.000	CTO	10 11 10
12.	<del></del>	AND DIRECT	DELETE	13.		<del></del>	ADDITIONS/CHANGES TO OFFICERS		□ Cha		Addition
TITLE (	0		☐ DELETE	1.1 TITLE		İ			Cria	ige	
NAME	WALTERS, G W		•	1.2 NAME							1
STREET ADDRESS	3200 NORTH WICKHAM ROA	ND #2		1.3 STREI	ETA	ADORESS					ĺ
CITY-ST-ZIP	MELBOURNE FL 32935		DELETE.	1.4 CITY-		-ZiP					Addition
TITLE	D		☐ DÉLETE	2.1 TITLE					☐ Cha	nge	☐ Addition
NAME _	TIPTON, MICHAEL			2.2 NAME			٠	_			}
STREET ADDRESS	3200 NORTH WICKHAM ROA	AD #2		2.3 STRE	ET#	ADDRESS	مغير ويتحاصين يداد والأنسياب الأم		≡ ٹیب ب	-,	
CITY-ST-ZIP	MELBOURNE FL 32935			2. 4 CITY-		-ZIP					CT Addres
TITLE			C DELETE	3.1 TITLE					Cha	uđe	Addition
NAME				3.2 NAME							
STREET ADDRESS	•			3.3 STREI		l l					Į
CITY-ST-ZIP				3.4. CITY		-ZIP					
TITLE			☐ DELETE	4.1 TITLE					☐ Cha	nge	☐ Addition
NAME	n .	•		4. 2 NAME							}
STREET ADDRESS				4.3 STRE	ET A	ADDRESS					1
CITY-ST-ZIP				4.4 CITY-		ZIP					
TITLE			☐ DELETE	5.1 TITLE					☐ Cha	nge	Addition \
NAME				5.2 NAME							
STREET ADDRESS				5.3 STREI	ETA	ADDRESS					ł
C/TY-ST-ZIP				5.4 CITY-		ZIP					
TITLE			☐ DELETE	6.1 TITLE			•		☐ Cha	nge	☐ Addition
NAME .	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			6.2 NAME							{
STREET ADDRESS	Continue to the Market			6.3 STRE	ET A	ADDRESS					
-V 21	and the second of the second o				0.7	and I					í

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 of rustee 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 attackment with an address, with all other like empowered.

SIGNATURE: