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 # **P97000066093**1. Corporation Name

R. C. WALKER, INC.

Principal Place	e of Eusiness	Mailing Address		()33()33()10 (31())34() 34()	
3617 CROWN P	T RD	3617 CROWN PT RD			
SUITE 7 4		SUITE #		DO NOT WRITE IN THIS SPACE	
071010011111111111111111111111111111111		JACKSONVILLE FL 32257		3. Date Incorporated or Qualifed	
US		us		07/29/1997	
A 53 - 4 0	l (Suringer	2a. Mailing Address		4. FEI Number	Applied For
— '	lace of Business	26. Walling Address		59-3465182	Not Applicable
21	44 -41	Sujte, Apt. #_etc.			\$8.75 Additional
Suite, Apt.	##-4	27 #		5. Certificate of Status Desired	Fee Required
City & State	77	City & State		6. Election Campaign Financing	\$5.00 May Be
23	_	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year I	ntangible
24	25	29	0	Personal Property Tax.	☐ Yes ☐ No
24(9. Name and Address of Curren			10. Name and Address of New Registere	d Agent
			81 Name		·
HERNANDEZ, MEREDITH A 82 Sheet Agrees (PA) Box Number is 101 Acceptable 1					
3617 CROWN POINT RD, STE X 4			82 Spar Address (PC) Box Number is All Acceptable . #		
JACI	ksonville fl 32257		83		,
			84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 697.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or roth, in the State of Florida, Such statutes agent or roth applying the corporation's board of directors. I hereby accept the applying the statement as registered of the corporation of					
agent. I am familiar with, and accept the aplications of Section 607,0505, Florida Statutes.					
SIGNATURE Street or protect page of registered agent and title if abolicable. (NOTE: Registered Agent signature required when remstating) DATE.					
	Signature, typed or printed name of registered age	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12.	PSTD /	DELETE	1.1 TITLE	Abbittottotota attack to state attack	Change
	WALKER, R.C.	_ 0200			
NAME	1 on our on one on #4 125 (4	1.2 STDCCT ADORESS	617 CROWN A. R.	0.#4
STREET ADDRESS	JACKSONVILLE FL 32257	1	1.4 City-St-ZiP		
CITY-ST-ZIP	VD	□ DELETE	2.1 TITLE		■ Addition
TITLE					
NAME	WALKER, PAMELA 3617 CROWN PT RD, STE	# U	2.3 STREET ADDRESS	3617 CROWN At. Rd	· ** *
STREET ADDRESS		=1			
CITY-ST-ZIP	JACKSONVILLE FL 32257	□ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
TITLE	}	El nerese			
NAME			3.2 NAME		
CTOCKT ADDDCCC	I		3.3 STREET ADDRESS		1

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.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

41 TM F

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

. CRAIGWALKER

DELETE

DELETE

DELETE

☐ Change

Change

Change

☐ Addition

Addition

☐ Addition

FILED

Mar 09, 1999 8:00 am Secretary of State

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