1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000082895

WALKER	8 & COMPANY CONSTRUCT	TION, INC.					
Principal Plac	e of Business	Mailing Address			[(\$3((\$5)))] (\$(3)) (\$\$)(\$6)((\$3(()) \$1)() \$10)		10101 3111 1361
931 N PENNSYLVANIA AVE WINTER PARK FL 32789 931 N PENNSYLVANIA AVE WINTER PARK FL 32789					DO NOT WRITE IN THE	S SPACE	
					3. Date Incorporated or Qualifed 09/25/1997		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Ap	plied For
21		26			59-3477346		t Applicable
Suite, Apt. #, etc. Suite, Apt. #, e					5. Certificate of Status Desired	\$8.75	
22		27			3. 00/11/02/03/11	Fee Re	
City & Star	te	City & State	-		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	
Zip	Country 25	Zip 30	Country	,	This corporation owes the current year in Personal Property Tax.	ntangible Yes	□No
	9. Name and Address of Currer	t Registered Agent			10. Name and Address of New Registered	Agent	
14444	1/50 D.I		81	Name			
WALKER, R L 931 N PENNSYLVANIA AVE			82 Street A		ess (P.O. Box Number is Not Acceptable)		
WIN	TER PARK FL 32789		83				
		•	84	City	F	85 Zip	Code
agent. I a	am familiar with, and accept the obliga	tions of, Section 607.0505, Florida	a Statutes	nt signature require	on's board of directors. I hereby accept the appoint t		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	ORS IN 12
TITLE	D	DELETE	1.1 TITLE			Change	Addition
NAME	WALKER, R L SR		1.2 NAME				
STREET ADDRESS	931 N PENNSYLVANIA AVE		1.3 STREE	T ADDRESS	·		
CITY-ST-ZIP	WINTER PARK FL 32789		1.4 CITY-S	ST-ZIP			
TITLE	D	☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME	WALKER, R L JR		2.2 NAME	Ì			II.
STREET ADDRESS			2.3 STREE	TADDRESS			
CITY-ST-ZIP	WINTER PARK FL 32789		2.4 CITY-	ST-ZIP		Chares	☐ Addition
TITLE	D	DELETE 3.17		1		Change	
NAME	FISHER, JOSEPH A		3.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP	WINTER PARK FL 32789	☐ DELETE	3.4. CITY-5	ST-ZIP		☐ Change	☐ Addition
TITLE			4.1 TITLE	Ì		C auturide	
NAME		•	4. 2 NAME				
STREET ADDRESS	5			TADDRESS			
CITY-\$T-ZIP	ļ	☐ DELETE	4.4 CITY-S 5.1 TITLE	si-ZIP		☐ Change	☐ Addition
TITLE		presic	5.2 NAME	-			
NAME STREET ADDRESS	,		1	T ADDRESS			
STREET ADDRESS CITY-ST-ZIP			5.4 CITY-S	i			
TITLE	 	☐ DELETE	6.1 TITLE			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 an attachment with an address with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP

Mar 26, 1999 8:00 am Secretary of State

03-26-1999 90025 003 ***150.00