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

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

## FILED May 13, 1999 8:00 am

ANNL	AL REPORT Secretary of State		Secretary of State	
	1999	DIVISION OF CORPORATIONS		05-13-1999 90015 021 ***150.00
DOCUMENT # P97000101150 \/				
1. Corporation		50 🗸		
i. Corporation	(rivali)e			
1	Walter E., Inc.			* 5 548403 - 90015 - 21
	warter E., Inc.			
Principal Place	e of Business	Mailing Address		_
825 Center Street 825 Center Stree			e t	
Jupiter, FL 33458 Jupiter, FL 33458				DO NOT WIGHT IN THIS CDACE
	,			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed
				12/01/97 Effective 11/28/97
7 Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number Applied For
<del></del> -	igot of Edonicss	26		65-0796146 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zíp	Country	Zip	Country	8. This corporation owes the current year Intangible Personal Property Tax. X Yes No
.24	25	29 30		Personal Property Tax. X Yes No  10. Name and Address of New Registered Agent
	9. Name and Address of Current	Registered Agent	81 Name	To. Name and Address of New Registered Agent
	J. Yeager			
1045 Talim Beden Bakes Boalevala, balee 1200				ress (P.O. Box Number is Not Acceptable)
West Palm Beach, FL 33401				
l				lor l 7:- Cete
			84 City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, t	he above-named corp	poration submits this statement for the purpose of changing its registered
office or re	egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florida. Such change was autho	rized by the corporation	on's board of directors. I hereby accept the appointment as registered
SIGNATURE				
<u> </u>	Signature, typed or printed name of registered agent		istered Agent signature require	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AND		13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Yeager, Walter E.		1.2 NAME	
NAME	<sup>-</sup> -	ii.	1.3 STREET ADDRESS	
STREET ADDRESS	Jupiter, FL 33458	#	14 CITY-ST-ZIP	
CITY-ST-ZIP TITLE	Jupicer, re 33430		2.1 TITLE	☐ Change ☐ Addition
NAME		i i	2.2 NAME	
STREET ADDRESS		8	23 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	31 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS		j	3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4 4 CITY-ST-ZIP	
TITLE		li li	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS		H	5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP 6.1 TITLE	☐ Change ☐ Addition
TITLE			62 NAME	Griange Addition
NAME			6.3 STREET ADDRESS	
STREET ADDRESS		ii ii	6.4 CITY-ST-ZIP	
CITY-ST-ZIP	portify that the information supplied with			Section 119.07(3)(i). Florida Statutes, I further certify that the information

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.

OA / 30/99 (561) 686–3307

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/30/99

(561) 686-3307

Date

Daytime Phone #