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 # P98000041784

1. Corporation Name

WALKER'S DRILLING & CONTRACTORS, INC.

Principal Place of Business	Mailing Address	
2123 TEMPLE STREET SARASOTA FL 34239	2123 TEMPLE STREET SARASOTA FL 34239	
2. Principal Place of Business	2a. Mailing Address	

Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90066 014 ***150.00



Principal Place	of Business	Mailing Address					#111 6811 1 88 111			
2123 TEMPLE STREET 2123 TEMPLE STREET										
SARASOTA FL	34239	SARASOTA FL 34239				100	NOT WRITE IN TH	S SPACE		
						3. Date Incorporated or				1
٠						05/06/1998				ļ
2 Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number			Applied For	1
<u> </u>	IZCO DI DUSINOSS	26	<u> </u>			59-3508	085		Not Applicable	1
Suite, Apt. #, etc.		Suite, Apt. #, etc.				SS 75 Additional				1
22		27				5. Certifcate of Status D	Desired	Fee F	Required	
City & State		City & State				6. Election Campaign Financing S5.00 May Be				
23		28	⊢ ′			Trust Fund Contribution Added to Fees				
Zip			Cou	Country		8. This corporation owe	orporation owes the current year Intangible			
24	25	29	29 30			Personal Property Tax.			□No	
	9. Name and Address of Cui	rrent Registered Agent		L.		10. Name and Address	of New Registere	d Agent		Į
				81	Name					
WAL	Ker, sandra				Street Add	Idress (P.O. Box Number is Not Acceptable)				1
2123	I TEMPLE STREET	,		82	Oli COL / IGO	ACCO (F.C. BOX Harrison to the	, , , , , , , , , , , , , , , , , , ,			
SAR	ASOTA FL 34239			83						
					0.1			85 Zir	Code	-
				84	City		`	L °° ′′'	code .	
11. Pursuant	to the provisions of Sections 607.	0502 and 607:1508, Florida Sta	tutes, the a	bove-	named corp	poration submits this stateme	nt for the purpose	of changing i	ts registered	- ==
l office or re	egistered agent, or both, in the St m familiar with, and accept the ob	ate of Florida, Such change was	aumonzeo	וו עמיני	e corporati	ion's board of directors. I her	eby accept the app	ointment as	registerea	
	in lanilinal with, and accept the ou	nigations of, occion our logoo, r	iona oran							l
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (NC	TE: Registered	1 Agent s	ignature requir	ed when reinstaling)	DATE] ;
12.	OFFICERS	AND DIRECTORS	13.			ADDITIONS/CHANGE	S TO OFFICERS			վ ։
TITLE	D	☐ DELETE	1.1 TI	TLE	- 1			Change	Addition	
NAME	WALKER, ELI G		1.2 N/	AME						;
STREET ADDRESS	2123 TEMPLE STREET		1.3 ST	TREETA	DDRESS .					li
CITY-ST-ZIP	SARASOTA FL 34239		1.4 CI	ITY-ST-	ZIP]
TITLE		☐ DELETE	2.1 TI	TLE				Change	Addition	
NAME			2.2 N	AME	ŀ					
STREET ADDRESS			2.3 ST	TREETA	DDRESS					
CITY-ST-ZIP			2.40	TY-ST-	ZPP					}
TITLE		OELETE:	™ 3.1 TI	TLE		್ ಗಳ್ಳು ಕ್ರೀಡ್ ಕ್ರ		[-] Change	Addition	
NAME			3.2 N	AME						1
STREET ADDRESS			3.3 ST	TREET A	DDRESS					
CITY-ST-ZIP			3.4. C	TY-ST-	ZIP					
TITLE	<u> </u>	☐ DELETE	4.1 TI				· ·	Chang	e	1
NAME			4.2N	IAME						.
STREET ADDRESS					DDRESS					
CITY-ST-ZIP				ITY-ST-						
TITLE		☐ DELETE	5.1 TI					Change	e 🔲 Addition	1
NAME			5.2 N							-
STREET ADDRESS			5.3 S	TREET A	DDRESS					
				ΠY-\$T-						-
CITY-ST-ZIP		☐ DELETE	6.1 TI					Change	e Addition	1
1 i		Describ	6.2 N						_	
NAME					DORESS					
STREET ADDRESS				ITY-ST-						
CITY-ST-ZIP			0.4 CI	111-21-	ᄺ					ı

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.

TE- & Walkevel in COWATHER