


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 8:00 am
Secretary of State

04-21-2006 90126 048 ***150.00

DOCUMENT # P99000048079 1. Entity Name WALTER INVESTMENT GROUP, INC.			
Principal Place of Business 777 S. HARBOUR ISLAND BLVD #360 TAMPANGS, FL 33602		Mailing Address 1447 MEYER LANE TARPON SPRINGS, FL 34688	
2. Principal Place of Business 1410 Lake Tarpon Ave.		3. Mailing Address 1410 Lake Tarpon Ave.	
Suite, Apt. #, etc. SUITE E		Suite, Apt. #, etc. SUITE E	
City & State Tarpon Springs, FL		City & State Tarpon Springs, FL	
Zip 34688		Zip 34688	
Country USA		Country USA	
4. FEI Number 59-3580768		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BRONSON, MICHAEL 777 S. HARBOUR ISLAND BLVD #360 TAMPA, FL 33602		7. Name and Address of New Registered Agent Name Michael Bronson Street Address (P.O. Box Number is Not Acceptable) 1410 Lake Tarpon Ave. SUITE E City Tarpon Springs FL Zip Code 34688	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u><i>Michael Bronson</i></u> (NOTE: Registered Agent signature required when reappointing) DATE: <u>4/18/06</u> <u>MICHAEL BRONSON</u>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PST	NAME BRONSON, MICHAEL L	TITLE PRESIDENT	NAME Michael Bronson
STREET ADDRESS 777 S. HARBOUR ISLAND BLVD., #360	CITY-ST-ZIP TAMPA; FL 33602	STREET ADDRESS 1410 Lake Tarpon Ave	CITY-ST-ZIP Tarpon Springs, FL 34688
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u><i>Michael Bronson</i></u> MICHAEL BRONSON		Date: <u>4/18/06</u> Daytime Phone #	