2005 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 07, 2005 8:00 am **Secretary of State DOCUMENT # P99000055001** 02-07-2005 90058 007 ***150.00 WALTHER PROPERTY MANAGEMENT, INC. Principal Place of Business Mailing Address P.O. BOX 5974 P.O. BOX 5974 DESTIN, FL 32540 DESTIN, FL 32540 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 01292005 Chg-P City & State City & State 4. FEI Number Applied For 59-3598906 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required -7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WALTHER, RUDOLF K Street Address (P.O. Box Number is Not Acceptable) 2858 BOAT CLUB LN NAVARRE, FL 32566 1102 HERRON WATCHWAY SANTA ROSA BEACH, FL 32590 City Zip Code 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. ne of registered agent and title if applicable 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE ☐ Delete ππε ☐ Change ☐ Addition WALTHER, RUDOLF K NAME NAME STREET ADDRESS STREET ADDRESS PO BOX 5974 DESTIN, FL 32540 CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7P Change ☐ Addition TITLE TITLE Defete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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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 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.

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