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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V44820

(1)

WALTER DEVELOPMENT GROUP, INC.

`

FILED
Jan 15 1998 8:00am
Secretary of State



Again   Agai	Principal Plac	e of Business		Mailing Addres	S									41511 -1-11 1461
US  DO NOT WRITE THIS SPACE  2. Principal Place of Business 22. Mailing Address 23. A late incorporated or Qualified O6/19/1992 24. Suite, Api. 4, etc. 27. Suite, Api. 4, etc. 27. City & State 28. City & State 29. Country 29. Suite, Api. 4, etc. 21. City & State 29. Country 29. Country 29. Suite, Api. 4, etc. 21. City & State 29. Country 29. Suite, Api. 4, etc. 21. City & State 21. City & State 21. City & State 21. City & State 22. City & State 22. City & State 23. Country 24. Suite, Api. 4, etc. 27. Country 28. The corporation were or has paid the current year Intemptible Personal Property Tax due June 20. Yes Now Now Address of Current Registered Agent  BERGIN, ED 4913 PICRIMINS PATHWAY TAMPA FL. 33611  88. Street: Address (P.O., Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 807,0503 and 607,1508, Florida Statutes, the above-named composition submits this statement for the purpose of changing is registered discorpt registered agent, or both, in the Space of Florida. Such change was submitted by the corporation's board of circutors. I harreby succept the approachment as registered discorpt registered agent, or both, in the Space of Florida. Such change was submitted by the corporation's board of circutors. I harreby succept the approachment as registered discorpt. In the Space of Profice Status and the above-named composition submits this statement for by purpose of changing is registered discorpt. In the Space of Profice Status and the above-named composition submits this statement for by purpose of changing is registered discorpt. In the Space of Profice Status and the above-named composition submits this statement for by purpose of changing is registered discorpt. In the Space of Profice Status and the above named composition submits this statement for by suppose of changing is registered agent. Or the Composition of Status and the above named composition submits this statement for the purpose of changing is registered agent. Or the Composition of Status and the above named compo	4320 W KENN	NEDY BLVD.		4320 W KENNE	DY BLVD.									
3. Date Incorporated of Custilled Office (1979) 1992  2. Principal Place of Business   2a. Mailing Address   25   3.5   4. PET Number   25   3.5	TAMPA FL 33609 TAMPA FL 33609									DO NO	T 18/017	E IN THIS C	יחארים	-
Principal Pilace of Business   2a. Mailing Address   4. FET Number	US US											E IN IMISS	PACE	
22	] .								3.	•	ualified			•
Suite, Apt. 8, etc.  Suite, Ap		N(6)	7	- Le-10 A 1 0						06/19/1992				
Suite, Apt #, etc.    Suite, Apt #, etc.   Suite, Apt #, etc.   Suite, Apt #, etc.   Suite, Apt #, etc.   Suite, Apt #, etc.   Status Desired   Status Desired   Se. Section Company Financing   St. 50.0 May Be Address of Current Registered Agent   St. 1													<u> </u>	
City & State   City & City   City						<del></del>				59-3131928				
City & State  38  City & State  38  Country  29  Country  29  Country  29  Country  29  Country  29  Country  29  20  20  20  20  20  20  20  20  20		#, etc.		<del>_</del>	, etc.				5.	Certificate of Status De	stred			
Trust Fund Contribution   Added to Fees   Zip   Country   Zip   Zi		<u></u>							<u> </u>				ree	Required
Zip		e	]	<del></del>					6.		_	_		
28										Trust Fund Contribution			Add	ed to Fees
BERGIN, ED  4913 PILORIMS PATHWAY TAMPA FL 33611  10. Name and Address of New Registered Agent  11. Pursuant to the provisions of Sections 607 0502 and 607, 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, or both in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, or both in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, or both in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, and the statement with, and accept the exponentiation as registered agent, and accept the collegations of, Section 607,0505, Florida Statutes, the acceptance agent agents required when retired to the collegations of Section 607,0505, Florida Statutes, and agent agents required when retired to the collegations of Section 607,0505, Florida Statutes, and agent agents required when retired to the collegations of Section 607,0505, Florida Statutes, and agent agents required when retired to the collegations of Change and Section 607,0505, Florida Statutes, and agent agents required to the collegations of Change and Section 607,0505, Florida Statutes, and agent agents required to the collegations of Change and Section 607,0505, Florida Statutes, and agent agents required when retired to the collegations of Change and Section 607,0505, Florida Statutes, and agent agent agent agent required when retired to the collegations of Change and Section 607,0505, Florida Statutes, and agent agent agent required when retired to the collegations of Change and Section 607,0505, Florida Statutes, and agent agent agent agent agent required when retired agent ag	<u> </u>	Count	ry	—, Zip	_	¬	У		8.	•		_	_ ′	~
BERGIN, ED 4913 PILCRIMS PATHWAY TAMPA FL 33611  82   Street Address (P.O. Box Number is Not Acceptable)  83   Street Address (P.O. Box Number is Not Acceptable)  84   City   FL   St   Zip Code  11. Parasant to the provisions of Sections 607 0502 and 697, 1508, Pointing Stanutes, the above-harmed corporation automits this statement for the purpose of changing its registered agent, and address the color of directors. I thereby accept the appointment as registered agent, and an increased agent and interest of directors of directors. I thereby accept the appointment as registered agent, and accept the obligations of, Sociol, Florida Statutes.  SIGNATURE   DP	24				30	<u> </u>								<u> </u>
BEHGIN, EU 4913 PLICRIMS PAIT-WAY TAMPA FL 33611  22 Street Address (P.O. Box Number is Not Acceptable)  33 Section of Sections 807.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and except the adjectors of the decorpt the adjectors of the appointment as registered agent and registered agent and the registered agent age		9. Name and Addre	ess of Current R	egistered Agent					10.	Name and Address of	New R	egistered A	lgent	
4913 PILGRIMS PATHWAY TAMPA FL 33611  82 Street Address (P.O. Box Number is Not Acceptable)  83   Street Address (P.O. Box Number is Not Acceptable)  84   City   FL   S5   Zp Code    94   City   FL   S5   Zp Code    95   City   FL   S5   Zp Code    96   City   FL   S5   Zp Code    96   City   FL   S5   Zp Code    97   City   FL   S5   Zp Code    97   City   FL   S5   Zp Code    98   City   City   FL   S5   Zp Code    98   City	BEI	rgin. Ed				81	N	lame						
TAMPA FL 33611  83  84		•	ΆΥ			82	S	treet Ad	Address (P	O Box Number is Not A	ccenta	hle)		<del></del>
SIGNATURE			• • •			"	Suger Address (F.O. DOX Number is Not Acceptable)							
TILE DP DELETE 11 TITLE DELETE 1 TITLE DELETE 22 NAME STREET ADDRESS CITY-ST-2IP DELETE 4 TITLE DELETE 31 TITLE DELETE 4 TITLE DELETE 4 TITLE DELETE 4 TITLE DELETE 5 TITLE DELETE 4 TITLE DELETE 4 TITLE DELETE 5 TITLE						83				<u></u>	•			
TILE DP DELETE 11 TITLE DELETE 1 TITLE DELETE 22 NAME STREET ADDRESS CITY-ST-2IP DELETE 4 TITLE DELETE 31 TITLE DELETE 4 TITLE DELETE 4 TITLE DELETE 4 TITLE DELETE 5 TITLE DELETE 4 TITLE DELETE 4 TITLE DELETE 5 TITLE										,				<del></del>
11. Pursuant to the provisions of Sections 607 6502 and 607 1508, Florids Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  Signature  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  DP						84	C	City				EI	85 2	Zip Code
SIGNATURE	11 Durament	to the provisions of Sec	tions 607.0502 a	nd 607 1508 Flori	da Statutac	the show	0.00	amod co	cornoration	a cultimite this statement	for the	.1 6-	changin	na ite registered
SIGNATURE	office or r	egistered agent, or both	h, in the State of I	Florida, Such char	nge was aut	horized by	y the	e corpor	oration's b	poard of directors. I here	by acce	pt the appo	ointment	as registered
12.	agent, I a	im familiar with, and acc	cept the obligation	ns of, Section 607	.0505, Floric	ta Statutes	S.							
TILE DP DP DELETE 1: TITLE DP DELETE 1: TITLE DP DELETE DELETE 1: TITLE DP	SIGNATURE													
TITLE					(NOTE, R		ent si	gnature rec			- OFF		DIDEO	15 32.53.
NAME   BERGIN, ED     12 NAME     13 STREET ADDRESS     1.5 CTY - ST - ZP			AFFICENS AND D		C) CTC			$ \tau$		ADDITIONS/CHANGES I	O OFFI			<del></del>
STREET ADDRESS   4913 PILGRIMS PRKWY.   1.3 STREET ADDRESS   1.4 CITY- ST-ZIP				الا ليا				}					L Guar	ge
CITY-ST-ZIP			m.a.a.											
TITLE	STREET ADDRESS		RKWY.			1.3 STREET	r add	ORESS						
NAME		TAMPA FL					ST - ZI	P						
2.3 STREET ADDRESS   2.4 CITY-ST-ZIP   Change   Addition     MAME	TITLE			L D	ELETE	2.1 TITLE		İ					L Chan	ge 📙 Addition
CITY-ST-ZIP	NAME					2.2 NAME								
TITLE	STREET ADDRESS					2.3 STREET	ADD	RESS						
TITLE	CITY-ST-ZIP					2. 4 CITY - S	ST - ZI	IP			·,_			
3.3 STREET ADDRESS   3.4 CITY-ST-ZIP				D	ELETE	3.1 TITLE							Chan	ge Addition
TITLE	NAME					3.2 NAME								
TITLE	SYRFET ADDRESS				ĺ	3.3 STREET	ΔΠN	IRESS						
TITLE														
NAME					ELETE		31-ZI						Chan	e Addition
STREET ADDRESS   4.3 STREET ADDRESS   4.4 CITY-ST-ZIP				ب ب								,		
A d CITY-ST-ZIP														
TITLE         DELETE         5.7 TITLE         Change         Addition           NAME         5.2 NAME         5.2 NAME         5.3 STREET ADDRESS         5.4 CITY-ST-ZIP         5.4 CITY-ST-ZIP         TITLE         Change         Addition           NAME         6.2 NAME         6.3 STREET ADDRESS         6.3 STREET ADDRESS         6.4 CITY-ST-ZIP         6.4 CITY-ST-ZIP														
STREET ADDRESS   S.2 NAME   STREET ADDRESS   S.3 STREET ADDRESS   S.4 CITY-ST-ZIP   S.4 CITY-ST-ZIP   S.4 CITY-ST-ZIP   S.4 CITY-ST-ZIP   S.5 NAME   STREET ADDRESS   S.6 CITY-ST-ZIP   S.7 CITY-ST-				——————————————————————————————————————	-		T-ZI	P					- 10	a lanco:
5.3 STREET ADDRESS   5.3 STREET ADDRESS   5.4 CITY-ST-ZIP   5.4 CITY-ST-ZIP   5.4 CITY-ST-ZIP   5.4 CITY-ST-ZIP   5.4 CITY-ST-ZIP   5.6 TITLE   Change   Addition	TITLE			וע ד	ELE IE			ľ					Unang	ge LLI Addition
CITY-ST-ZIP	NAME					5.2 NAME		-						
TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS           CITY-ST-ZIP         6.4 CITY-ST-ZIP	STREET ADDRESS					5.3 STREET	ADD	RESS						
NAME  STREET ADDRESS  6.2 NAME  6.3 STREET ADDRESS  CITY-SI-ZIP  6.4 CITY-ST-ZIP	CITY-ST-ZIP					5.4 CITY - S	T- <i>Z</i> IF	P						
STREET ADDRESS  CITY-SI-ZIP  6.3 STREET ADDRESS  6.4 CITY-ST-ZIP	TITLE			D8	ELETE	6.1 TITLE				· · · · · · · · · · · · · · · · · · ·			Chan	ge Addition
CITY-SI-ZIP 6.4 CITY-ST-ZIP	NAME					6.2 NAME								
CITY-SI-ZIP 6.4 CITY-ST-ZIP	STREET ADDRESS					6.3 STREFT	ADDI	RESS						
								- 1						
		ertify that the information	n supplied with the	his filing does not	qualify for the				d in Section	n 119.07(3)(i), Florida St	atutes.	I further cer	tify that	the information

4. I hereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report ensurement annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver of revisite 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.

SIGNATURE:

LIVER REQUIRED

1-5-98 81

813287162