2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2015
Secretary of State
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Entity Name: WALKER MILLER EQUIPMENT COMPANY, INC.

Current Principal Place of Business:

4400 N. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32804

Current Mailing Address:

4400 N. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32804 US

FEI Number: 59-0940692

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILLER, CONNIE L
4400 N. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32804 US

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.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PSD
Name	MILLER, CONNIE L
Address	4948 WINWOOD WAY
City-State-Zip:	ORLANDO FL 32819

Title	VTD
Name	MILLER, CONSTANCE S
Address	4401 DOWN POINT LANE
City-State-Zip:	WINDERMERE FL 34786

Title	D
Name	MILLER, STEVE
Address	4400 NORTH ORANGE BLOSSOM TRAIL
City-State-Zip:	ORLANDO FL 32804

Title	D
Name	MILLER, NANCY
Address	4400 NORTH ORANGE BLOSSOM TRAIL
City-State-Zip:	ORLANDO FL 32804

Title	D
Name	MILLER, DONNIE
Address	4400 NORTH ORANGE BLOSSOM TRAIL
City-State-Zip:	ORLANDO FL 32804

Title	D
Name	MILLER, ANNA
Address	4400 NORTH ORANGE BLOSSOM TRAIL
City-State-Zip:	ORLANDO FL 32804

Title	VP
Name	NETHING, ANNA J.
Address	4400 N. ORANGE BLOSSOM TRAIL
City-State-Zip:	ORLANDO FL 32804

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CONNIE L. MILLER PRESIDENT 01/12/2015

Electronic Signature of Signing Officer/Director Detail — Date