

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000088154

**Entity Name:** THE WALKER CONTRACTING GROUP, INC.**Current Principal Place of Business:**3074 N HORSESHOE DRIVE  
NAPLES, FL 34104**Current Mailing Address:**3074 N HORSESHOE DRIVE  
NAPLES, FL 34104 US**FEI Number:** 59-3748586**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WALKER, MICHAEL K  
3074 N HORSESHOE DR  
NAPLES, FL 34104 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           | SECRETARY, TREASURER |
| Name            | MIXTER, ELIZABETH    |
| Address         | 3074 N HORSESHOE DR  |
| City-State-Zip: | NAPLES FL 34104      |

|                 |                     |
|-----------------|---------------------|
| Title           | PRESIDENT           |
| Name            | WALKER, MICHAEL K   |
| Address         | 3074 N HORSESHOE DR |
| City-State-Zip: | NAPLES FL 34104     |

|                 |                     |
|-----------------|---------------------|
| Title           | VP                  |
| Name            | GOLDEN, WILLIAM     |
| Address         | 3074 N HORSESHOE DR |
| City-State-Zip: | NAPLES FL 34104     |

|                 |                        |
|-----------------|------------------------|
| Title           | CFO                    |
| Name            | WALKER, KATIE K        |
| Address         | 3074 N HORSESHOE DRIVE |
| City-State-Zip: | NAPLES FL 34104        |

*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:** KATIE K WALKER**CFO****02/23/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date