

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000001068

FILED  
Apr 13, 2009  
Secretary of State

Entity Name: KALWALL CORP.

**Current Principal Place of Business:**

1111 CANDIA RD.  
MANCHESTER, NH 03109

**New Principal Place of Business:**

**Current Mailing Address:**

POB 4105  
LICENSING DEPT  
MANCHESTER, NH 03108

**New Mailing Address:**

FEI Number: 02-0237271      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
110 NORTH MAGNOLIA STREET  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KELLER, RICHARD R  
Address: 1111 CANDIA ROAD  
City-St-Zip: MANCHESTER, NH 03109

Title: VD ( ) Delete  
Name: KELLER, BRUCE M  
Address: 1111 CANDIA ROAD  
City-St-Zip: MANCHESTER, NH 03109

Title: ST ( ) Delete  
Name: GARFIELD, KATHERINE  
Address: 41 UNION ST  
City-St-Zip: MANCHESTER, NH 03103

Title: CD ( ) Delete  
Name: KELLER, ROBERT R  
Address: 41 UNION ST  
City-St-Zip: MANCHESTER, NH

Title: D ( ) Delete  
Name: KELLER, ROBERT R JR  
Address: 41 UNION ST  
City-St-Zip: MANCHESTER, NH

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: KATHERINE K. GARFIELD

ST

04/13/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date