

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F95000001068

Entity Name: KALWALL CORP.

**Current Principal Place of Business:**

1111 CANDIA RD.  
MANCHESTER, NH 03109

**Current Mailing Address:**

PO BOX 4105  
LICENSING DEPT  
MANCHESTER, NH 03108-4105

FEI Number: 02-0237271

Certificate of Status Desired: No

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYES ST.  
TALLAHASSEE, FL 32301 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 PD  
Name KELLER, RICHARD R  
Address 1111 CANDIA ROAD  
City-State-Zip: MANCHESTER NH 03109

Title DIRECTOR  
Name KELLER, BRUCE M  
Address 1111 CANDIA ROAD  
City-State-Zip: MANCHESTER NH 03109

Title DIRECTOR, TREASURER  
Name GARFIELD, KATHERINE  
Address 43 UNION ST  
City-State-Zip: MANCHESTER NH 03103

Title D  
Name KELLER, ROBERT R JR.  
Address 41 UNION ST  
City-State-Zip: MANCHESTER NH

Title DIRECTOR, VP  
Name KELLER, AMELIA S  
Address 1111 CANDIA RD.  
City-State-Zip: MANCHESTER NH 03109

Title DIRECTOR  
Name KELLER, SCOTT K  
Address 1111 CANDIA RD.  
City-State-Zip: MANCHESTER NH 03109

Title DIRECTOR, VP, SECRETARY  
Name KELLER, DAVID W  
Address 1111 CANDIA RD.  
City-State-Zip: MANCHESTER NH 03109

Title DIRECTOR  
Name KELLER, SAMUEL F  
Address 1111 CANDIA ROAD  
City-State-Zip: MANCHESTER NH 03109

**Continues on page 2**

*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: KATHERINE K GARFIELD

TREASURER

01/13/2021

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name BAKER, DAVID  
Address 1111 CANDIA ROAD  
City-State-Zip: MANCHESTER NH 03109

Title DIRECTOR  
Name KELLER, MICHAEL R  
Address 1111 CANDIA RD.  
City-State-Zip: MANCHESTER NH 03109

Title DIRECTOR  
Name KELLER, ROBERT R III  
Address 1111 CANDIA ROAD  
City-State-Zip: MANCHESTER NH 03109