

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # 813722 1. Entity Name SEABROOK WALLCOVERINGS, INC.	
---	---

Principal Place of Business 1325 FARMVILLE ROAD MEMPHIS, TN 38122-0597 US	Mailing Address 1325 FARMVILLE ROAD MEMPHIS, TN 38122-0597 US
---	---



01272006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 62-0435922	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SEABROOK, JAMES H., JR. 1325 FARMVILLE ROAD MEMPHIS, TN
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD COOKSEY, L.G. 1325 FARMVILLE ROAD MEMPHIS, TN
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SC HAAG, LEON 1325 FARMVILLE ROAD MEMPHIS, TN
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SEABROOK, JAMES H III 1325 FARMVILLE ROAD MEMPHIS, TN 38122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1100000417133
02/13/06-80044-024 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **LEON HAAG**
Leon Haag

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/06
Date

901-320-3500
Daytime Phone #