

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # F04000001153

1. Entity Name
NU WALLS, INC.



Principal Place of Business
**7308 GANO ROAD
GROVELAND, FL 34736**

Mailing Address
**7308 GANO ROAD
GROVELAND, FL 34736**



02122007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
37-1067029

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HANKS, STEVE
8907 COURTYARD LANE
GROVELAND, FL 34736**

**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

Steve Hanks
Signature, typed or printed name of registered agent and title if applicable.

STEVE HANKS: VICE-PRES.

3-29-07

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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
**PCD
RUPPEL, JAMES G
7308 GANO ROAD
GROVELAND, FL 34736**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
HANKS, STEVE
8907 COURTYARD LANE
GROVELAND, FL 34736**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VSTD
RUPPEL, KAYE
7308 GANO ROAD
GROVELAND, FL 34736**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**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: *

James Ruppel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES RUPPEL PRES.

3-29-07

DATE

Daytime Phone #