

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006933

FILED
Apr 29, 2010
Secretary of State

Entity Name: SUPERIOR WALLS OF AMERICA, LTD., INC.

Current Principal Place of Business:

937 E EARL RD
NEW HOLLAND, PA 17557 US

New Principal Place of Business:

Current Mailing Address:

937 E EARL RD
NEW HOLLAND, PA 17557 US

New Mailing Address:

FEI Number: 23-2273863 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CEO
Name: ZIMMERMAN, MELVIN M
Address: 937 E EARL RD
City-St-Zip: NEW HOLLAND, PA 17557

Title: SEC
Name: GINGRICH, GLENN H
Address: 160 MAR-KAUF DRIVE
City-St-Zip: NEW HOLLAND, PA 17557

Title: D
Name: ROTH, LOWELL R
Address: 916 WALNUT ST
City-St-Zip: NEW HOLLAND, PA 17557

Title: PRES
Name: JAMES, COSTELLO J
Address: 937 E EARL RD
City-St-Zip: NEW HOLLAND, PA 17557

Title: D
Name: HEITZ, TIMOTHY A
Address: 101 W CONESTOGA ST
City-St-Zip: NEW HOLLAND, PA 17557

Title: CFO
Name: WELLER, KEITH
Address: 937 E EARL RD
City-St-Zip: NEW HOLLAND, PA 17557

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: KEITH WELLER

CFO

04/29/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date