

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Apr 08, 2005
Secretary of State**

DOCUMENT# J12975

Entity Name: WALL SYSTEMS, INC. OF SOUTHWEST FLORIDA

Current Principal Place of Business:

New Principal Place of Business:

4395 CORPORATE SQUARE
NAPLES, FL 34104 US

Current Mailing Address:

New Mailing Address:

4395 CORPORATE SQUARE
NAPLES, FL 34104 US

FEI Number: 59-2679657

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

JOHNSON, KIMBERLY LEACH
4501 TAMIAMI TRAIL NORTH
SUITE 204
NAPLES, FL 34103 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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BUDD, RUSSELL A
Address: 5981 SHADY OAKS LANE
City-St-Zip: NAPLES, FL 34119

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

Title: TSD () Delete
Name: FORD, GREGORY C
Address: 2004 IMPERIAL GOLF COURSE BV
City-St-Zip: NAPLES, FL 34110

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

Title: VD () Delete
Name: BROUSSEAU, GERRY L
Address: 935 16TH AVE NE
City-St-Zip: NAPLES, FL 34120

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

Title: () Delete
Name:
Address:
City-St-Zip:

Title: VD () Change (X) Addition
Name: ZINO, BART P
Address: 113 HERITAGE WAY
City-St-Zip: NAPLES, FL 34110

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RUSSELL A BUDD

PD

04/08/2005

Electronic Signature of Signing Officer or Director

Date