2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000104604

Entity Name
 WALLPAPER BY ANGIE, LLC



FILED May 24, 2007 08:00 A Secretary of State

Principal Place of Business

1400 MONTEREY DR. EUSTIS, FL 32726 Mailing Address

1400 MONTEREY DR. Eustis, Fl 32726



05032007 No Chg-LLC

CR2E083 (11/05)

***	4. FEI Number 04-3810556		Applied For Not Applicable
	5. Certificate of Status Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

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

BUTLER, ANGELA 1400 MONTEREY DR. EUSTIS, FL 32726

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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.	

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by September 14, 2007

9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BUTLER, ANGELA 1400 MONTEREY DR. EUSTIS, FL 32726	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-SI-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited hability company of the receiver or true empowering to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

5-20-07 352-589-2112

Daytime Phone a