

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 27, 2004 8:00 am**  
**Secretary of State**

08-27-2004 90009 047 \*\*\*150.00

<b>DOCUMENT # L09168</b> 1. Entity Name <b>WALLPAPER CITY &amp; DECORATING CENTER, INC.</b>			
Principal Place of Business <b>C/O 2655 MCCORMICK DR CLEARWATER, FL 33759</b>		Mailing Address <b>C/O 2655 MCCORMICK DR CLEARWATER, FL 33759</b>	
2. Principal Place of Business <b>712 S. Missouri Ave</b> Suite, Apt. #, etc.		3. Mailing Address <b>712 S. Missouri Ave</b> Suite, Apt. #, etc.	
City & State <b>Clearwater, Florida</b> Zip Country <b>33756 USA</b>		City & State <b>Clearwater, Florida</b> Zip Country <b>33756 USA</b>	
4. FEI Number <b>59-3012188</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>GONZALES, LARRY J 2655 MCCORMICK DR. CLEARWATER, FL 33759</b>		7. Name and Address of New Registered Agent Name <b>Terri Nagel</b> Street Address (P.O. Box Number Not Acceptable) <b>1133 ROYAL TROON CT.</b> City <b>TARPON SPRINGS FL</b> Zip Code <b>34688</b>	
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 <u><i>Terri Nagel</i></u> <b>Terri Nagel</b> <b>8-23-04</b> <small>Signature, typed or printed name of registered agent and this is applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
<b>FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D NAGEL, STEVEN</b> <input type="checkbox"/> Delete <b>712 S. MISSOURI AVENUE CLEARWATER, FL</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PSTD NAGEL, TERRI</b> <input type="checkbox"/> Delete <b>712 S. MISSOURI AVENUE CLEARWATER, FL</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	— <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	— <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	— <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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.			
<b>SIGNATURE: <u><i>Terri Nagel</i></u> <b>PRES.</b> <b>8-23-04</b> <b>(727) 461-1685</b></b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER/DIRECTOR Date Daytime Phone #</small>			

8-23-04

Attachment  
24681901

WALLPAPER CITY & DECORATING CENTER, INC  
712 S. MISSOURI AVE.  
CLEARWATER, FL 33756

Document # L09168

I'm changing registered agents because he tells me that my annual report form never goes to him. and I know it doesn't come to me.

Unfortunately my previous registered agent who handled this for me for years died

Please accept my payment of \$150<sup>00</sup> and since forms will now come directly to me, they will be paid in a timely manner.

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Thank you.

Dee Nagel  
PRES.