## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000044394

Entity Name: SOLID WALL SYSTEMS, INC.

FILED Apr 26, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
6767 N. WICKHAM ROAD, SUITE 500 MELBOURNE, FL 32940					
Current Mailing Address:			New Mailing Address:		
	CKHAM ROAD NE, FL 32940	, SUITE 500			
FEI Number:	59-3714312	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:					
BUESCHER, KEITH 6767 N. WICKHAM ROAD, SUITE 500 MELBOURNE, FL 32940 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	
Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BUESCHER, SCO	M ROAD, SUITE 500	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BUESCHER, HO	M ROAD, SUITE 500	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BUESCHER, KEI	M ROAD, SUITE 500	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GIRARD, SUSÁN	M ROAD, SUITE 500	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SWAIN, LINDA	Delete M ROAD, SUITE 500 - 32940	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MALONE, KIRK	Delete M ROAD, SUITE 500 - 32940	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ROBERT M. KUSH T 04/26/2005