2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000129698

1. Entity Name
WALLIS WALLCOVERING, INC.

Principal Place of Business	Mailing Address
5139 HAMILTON LANE PACE, FL 32571	5139 HAMILTON LANE PACE, FL 32571

DO NOT WRITE IN THIS SPACE

04302006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-1469988	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WALLIS, GORDON K
5139 HAMILTON LANE
PACE, FL 32571

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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.

SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE. Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution.   ☐   **$5.00** May Be Added to Fees

10.	OFFICERS AND DIRECTORS	
TITLE	PRES	
NAME	WALLIS, GORDON K	
STREET ADDRESS	5139 HAMILTON LANE	
CITY-ST-ZIP	PACE, FL 32571	
TITLE	DIR	
NAME	WALLIS, GORDON K	
STREET ADDRESS	5139 HAMILTON LANE	
CITY-ST-ZIP	PACE, FL 32571	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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05/17/06-80128-001 150.00

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12. 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 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.

SIGNATURE: _Gordon Wallis_   5/1/06   (850) 995-8688

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #