

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000135526

FILED
Apr 14, 2005
Secretary of State

Entity Name: TOM PHILLIPS CUSTOM WALLCOVERINGS INC.

Current Principal Place of Business:

1415 N. BALKO PATH
LECANTO, FL 34461

New Principal Place of Business:

Current Mailing Address:

1415 N. BALKO PATH
LECANTO, FL 34461

New Mailing Address:

FEI Number: 14-1899384

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIPS, CINDY
1415 N. BALKO PATH
LECANTO, FL 34461 US

Name and Address of New Registered Agent:

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:

Title: PV () Delete
Name: PHILLIPS, TOM
Address: 1415 N. BALKO PATH
City-St-Zip: LECANTO, FL 34461

Title: ST () Delete
Name: PHILLIPS, CINDY
Address: 1415 N. BALKO PATH
City-St-Zip: LECANTO, FL 34461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: CINDY PHILLIPS

VP

04/14/2005

Electronic Signature of Signing Officer or Director

Date