## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000139066

City-St-Zip:

CAPE CANAVERAL, FL 32950

Entity Name: FREEMAN WALL COVERING INC.

FILED Mar 13, 2007 Secretary of State

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Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
335 DUET MERRITT	AVE ISLAND, FL	32952			
Current Mailing Address:			New Mailing Address:		
335 DUET MERRITT	AVE ISLAND, FL	32952			
FEI Number:	: 90-0120759	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
FREEMAN 335 DUET MERRITT		32952 US			
	named entity of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	npaign Financir	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FREEMAN, TF 335 DUET AVI		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	FREEMAN, MI 335 DUET AVI		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	O (X SILLS, ELLEN 116 PIERCE		Title: Name: Address	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

City-St-Zip:

SIGNATURE: TRACY FREEMAN D 03/13/2007