

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000028207

FILED  
Feb 21, 2012  
Secretary of State

**Entity Name:** NAPOLI WALLCOVERING, INC

**Current Principal Place of Business:**

1400 MYSTIC COURT  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

1400 MYSTIC COURT  
WELLINGTON, FL 33414

**New Mailing Address:**

FEI Number: 26-4548190

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NAPOLI, LINDA  
1400 MYSTIC COURT  
WELLINGTON, FL 33414 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NAPOLI, ANTHONY  
Address: 1400 MYSTIC COURT  
City-St-Zip: WELLINGTON, FL 33414

Title: VP  
Name: NAPOLI, LINDA  
Address: 1400 MYSTIC COURT  
City-St-Zip: WELLINGTON, FL 33414

I hereby 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 all other like empowered.

SIGNATURE: LINDA NAPOLI

VP

02/21/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date