2008 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 01, 2008 08:00 AN **Secretary of State** DOCUMENT # P94000077778 DAN ODUM'S WALLCOVERINGS, INC. Principal Place of Business Mailing Address 11851 BRADLEY COURT 11851 BRADLEY COURT BONITA SPRINGS, FL 34135 BONITA SPRINGS, FL 34135 CR2E034 (11/05) 01172008 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0538529 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ODUM, DANIEL DO NOT WRITE 11851 BRADLEY COURT **BONITA SPRINGS, FL 34135** IN THIS SPACE 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 it applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 \Box Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE ODUM, DANIEL NAME 11851 BRADLEY COURT STREET ADDRESS CHY-ST-ZIP BONITA SPRINGS, FL 34135 U000006811622 02/12/08-80014-001 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS

12. Thereby 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 attacl all other like empowered

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY ST-7(P TITLE

STREET ADDRESS CITY-ST-ZIP

NG OFFICER OR DIRECTOR

1-30-08 239-289-4384

FILED