

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000001780

Entity Name: SOUTHEAST WALLS, INC.

FILED
Apr 20, 2006
Secretary of State

Current Principal Place of Business:

235 WEST DRIVE
MELBOURNE, FL 32904 US

New Principal Place of Business:

Current Mailing Address:

235 WEST DRIVE
MELBOURNE, FL 32904 US

New Mailing Address:

FEI Number: 59-3286914

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, JOSEPH R
541 FIEDLER ST NE
PALM BAY, FL 32907 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: P () Delete
Name: MORRIS, JOSEPH R
Address: 541 FIEDLER ST. NE
City-St-Zip: PALM BAY, FL 32907

Title: VP () Delete
Name: MORRIS, THOMAS R
Address: 1980 WIND BROOK DRIVE SE
City-St-Zip: PALM BAY, FL 32909

Title: S () Delete
Name: MORRIS, JOHN F
Address: 561 RANIER ST NE
City-St-Zip: PALM BAY, FL 32907

Title: T () Delete
Name: MORRIS, GLORIA
Address: 1023 WORTHINGTON SPRINGS DR
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: MORRIS, THOMAS R
Address: 1791 DEVONWOOD CT
City-St-Zip: PALM BAY, FL 32909

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 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.

SIGNATURE: JOSEPH R. MORRIS

P

04/20/2006

Electronic Signature of Signing Officer or Director

Date