

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000097563

Entity Name: CUSTOM WALLS, INC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

6924 ALOERWOOD DRIVE
SARASOTA, FL 34243

New Principal Place of Business:

6924 ALDERWOOD DRIVE
SARASOTA, FL 34243

Current Mailing Address:

6924 ALOERWOOD DRIVE
SARASOTA, FL 34243

New Mailing Address:

6924 ALDERWOOD DRIVE
SARASOTA, FL 34243

FEI Number: 65-0963108

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, JAMES C
1504 60TH ST. E.
BRADENTON, FL 34208 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: JOHNSON, JAMES
Address: 1504 60TH ST E
City-St-Zip: BRADENTON, FL 34208

Title: VP () Delete
Name: DAVIS, LONNIE
Address: 6924 ALDERWOOD DR
City-St-Zip: SARASOTO, FL 34203

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: DAVIS, LONNIE
Address: 6924 ALDERWOOD DR
City-St-Zip: SARASOTA, FL 34243

I hereby certify that the information supplied with this filing does not qualify 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: LONNIE DAVIS

VP

04/27/2009

Electronic Signature of Signing Officer or Director

Date