

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G89306

FILED
Jan 15, 2009
Secretary of State

Entity Name: CIND-AL MANUFACTURING CO., INC.

Current Principal Place of Business:

13518 GRANVILLE AVENUE
CLERMONT, FL 347119628

New Principal Place of Business:

Current Mailing Address:

13518 GRANVILLE AVENUE
CLERMONT, FL 347119628

New Mailing Address:

FEI Number: 59-2378196

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIBBS, LOUIE W
13518 GRANVILLE AVE
CLERMONT, FL 34711 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: GIBBS, LOUIE W.,
Address: 17520 APSHAWA RD
City-St-Zip: CLERMONT, FL 34711

Title: ST (X) Delete
Name: LOSEY, DENNIS
Address: 6129 WADE STREET
City-St-Zip: LEESBURG, FL 34748

Title: VP () Delete
Name: ALBERS, DAMON
Address: 2648 VALIANT DRIVE
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: GIBBS, LOUIE W.,
Address: 17520 APSHAWA RD
City-St-Zip: CLERMONT, FL 34711

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

Title: P (X) Change () Addition
Name: ALBERS, DAMON L
Address: 2648 VALIANT DRIVE
City-St-Zip: CLERMONT, FL 34711

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: DAMON L ALBERS

P

01/15/2009

Electronic Signature of Signing Officer or Director

Date