


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90206 020 ***150.00

DOCUMENT # J15850

1. Entity Name
BAY ALUMINIUM, INC.




Principal Place of Business
3845
4097 BAYSHORE DR.
NAPLES, FL 34112

Mailing Address
3745
4097 BAYSHORE DR.
NAPLES, FL 34112

DO NOT WRITE IN THIS SPACE

Phone 239-775-154039031



01142004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2709422

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

DUNN, PATRICIA M.
4097 BAYSHORE DR.
NAPLES, FL 34112

DO NOT WRITE 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DUNN, PATRICIA M. 4097 BAYSHORE DR. NAPLES, FL 34112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DUNN, ROBERT A 4097 BAYSHORE DR. NAPLES, FL 34112
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 attachment with an address, with all other like empowered.

SIGNATURE: Robert A. Dunn President 2-24-04 239-775-1711

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Robert A. DUNN