

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 07, 2004 8:00 am**  
**Secretary of State**

04-07-2004 90037 043 \*\*\*150.00

**DOCUMENT # 409589**

1. Entity Name  
**ACME ALUMINUM SUPPLY, INC.**



Principal Place of Business

**6203 US 27 S  
SEBRING, FL 33872 US**

Mailing Address

**6203 US 27 S  
SEBRING, FL 33872 US**

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

01152004

Chg-P

CR2E034 (10/03)

4. FEI Number

**59-1416209**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

Zip  
**33876-5708**

Country

Zip  
**33876-5708**

Country

6. Name and Address of Current Registered Agent

**TROMBLEY, MICHAEL J.  
329 S. COMMERCE AVENUE  
SEBRING, FL 33870**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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 if applicable.

(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 PD ☐ Delete  
NAME MCGEHEE, GARY P  
STREET ADDRESS 3816 NORMANDY DRIVE  
CITY-ST-ZIP SEBRING, FL

TITLE STD ☐ Delete  
NAME MCGEHEE, RUTH ANN  
STREET ADDRESS 3816 NORMANDY DRIVE  
CITY-ST-ZIP SEBRING, FL

TITLE D ☐ Delete  
NAME MCGEHEE, PAUL T  
STREET ADDRESS 3816 NORMANDY DR  
CITY-ST-ZIP SEBRING, FL

TITLE D ☐ Delete  
NAME WELDY, BETH  
STREET ADDRESS 2003 EVERLAST  
CITY-ST-ZIP SEBRING, FL

TITLE VD ☐ Delete  
NAME WELDY, BETH  
STREET ADDRESS 2003 EVERLAST  
CITY-ST-ZIP SEBRING, FL

TITLE VD ☐ Delete  
NAME WELDY, CURTIS  
STREET ADDRESS 2003 EVERLAST  
CITY-ST-ZIP SEBRING, FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Ruth Ann McGehee* **RUTH ANN MCGEHEE**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-02-04

863-385-1531

Date

Daytime Phone #