

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 497283

FILED
Apr 12, 2006
Secretary of State

Entity Name: ACE ALUMINUM DISTRIBUTORS, INC.

Current Principal Place of Business:

370 WEST LEMON LANE
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

370 WEST LEMON LANE
CASSELBERRY, FL 32707

New Mailing Address:

FEI Number: 59-1656552

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIDSON, RONALD K
370 WEST LEMON LANE
CASSELBERRY, FL 32707 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SPAULDING, JOSEPH C.,
Address: 790 E. LEHIGH DRIVE
City-St-Zip: DELTONA, FL 32738

Title: VD () Delete
Name: SPAULDING, HELGA
Address: 790 E. LEHIGH DRIVE
City-St-Zip: DELTONA, FL 32738

Title: SD () Delete
Name: LAURENDINE, DONNA
Address: 552 IRIS STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VPT () Delete
Name: DAVIDSON, RONALD K
Address: 279 MAIN ROAD
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: DAVIDSON, BRENDA J
Address: 279 MAIN ROAD
City-St-Zip: LAKE MARY, FL 32746

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: RONALD K. DAVIDSON

VPT

04/12/2006

Electronic Signature of Signing Officer or Director

Date