

FILED
Aug 16, 2001 8:00 am
Secretary of State

08-16-2001 90004 040 ***550.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 844103

1. Entity Name

HYDRO ALUMINUM ROCKLEDGE, INC.

A0081511

DO NOT WRITE IN THIS SPACE

Principal Place of Business		Mailing Address	
2. Principal Place of Business 100 GUS HIPP BLVD.		3. Mailing Address 100 GUS HIPP BLVD.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State ROCKLEDGE, FL		City & State ROCKLEDGE, FL	
Zip 32955-4701		Zip 32955-4701	
Country USA		Country USA	
4. FEI Number 59-1930466		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301			
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.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)			
DATE _____			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐		10. Election Campaign Financing Trust Fund Contribution. ☐	
(See criteria on back)		\$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT/DIRECTOR DENNIS J. HERRON 100 GUS HIPP BLVD. ROCKLEDGE, FL 32955-4701 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SECRETARY DALE BASWELL 100 GUS HIPP BLVD. ROCKLEDGE, FL 32955-4701 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR ULE SMITH ROUTE DE CHAVANNES 31 CH-1007 LAUSANNE, SWITZERLAND ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR KEN WALLACE 100 N. TAMPA ST., #3350 TAMPA, FL. 33602 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Ken Wallace</u>		7/20/01 813-222-3817	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone	

CR2E034 (11/00)