2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # F01000004102

1. Entity Name
ALRO INDUSTRIAL SUPPLY CORPORATION

Principal Place of Business	*Mailing Address*
3100 E. HIGH STREET JACKSON, MI 49204	P.O. BOX 927 JACKSON, MI 49204

DO NOT WRITE IN THIS SPACE

01232006 No Chg-P CR2E034 (11/05)

4. FEI Number
38-2598738
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GLICK, BARRY
6200 PARK OF COMMERCE BLVD.
BOCA RATON, FL 33431

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 _____
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, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	CD
NAME	GLICK, ALVIN L
STREET ADDRESS	1727 THORNWOOD
CITY-ST-ZIP	JACKSON, MI 49203
TITLE	P
NAME	MARTOIA, RICHARD S
STREET ADDRESS	5003 BROOKSIDE
CITY-ST-ZIP	JACKSON, MI 49203
TITLE	VD
NAME	ALYEA, G. MARK
STREET ADDRESS	6901 LANSING AVE.
CITY-ST-ZIP	JACKSON, MI 492018233
TITLE	T
NAME	HOLLENBECK, LEO
STREET ADDRESS	6979 PADDOCK LANE
CITY-ST-ZIP	JACKSON, MI 49201
TITLE	ST
NAME	GLICK, RANDY
STREET ADDRESS	5187 THAMES CT.
CITY-ST-ZIP	JACKSON, MI 49201
TITLE	SD
NAME	GLICK, CARLTON L
STREET ADDRESS	2612 MULLIGAN DRIVE
CITY-ST-ZIP	JACKSON, MI 49203

U00000411096
02/09/06-80063-005 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Carlton L Glick 1-23-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #