FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F76594** **(3)**

1. Corporation Name

TNT ALUMINUM, INC.

Principal Place of Business

109 CLAY AVE
LADYLAKE FL 32159
US

Mailing Address

P.O. BOX 237
LADYLAKE FL 32158-0237
US

2. Principal Place of Business
21
Suite Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite Apt. #, etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: **04/16/1982**

3a. Date of Last Report: **03/07/1995**

4. FEI Number: **59-2183693** Applied For / Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. **Name and Address of Current Registered Agent**

HURST, TIMOTHY J
109 CLAY AVE
LADY LAKE FL 32159

10. **Name and Address of New Registered Agent**

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.0505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and I accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Registered Agent's Signature (Required for Filing) — Date

12. OFFICERS AND DIRECTORS

TITLE	PS	☐ DELETE
NAME	HURST, TIMOTHY J	
Street Address	109 CLAY AVE	
City, St, Zip	LADY LAKE FL	
TITLE	VP	☐ DELETE
NAME	HURST, RAY M.	
Street Address	1307 DORA DRIVE	
City, St, Zip	LEESBURG FL	
TITLE	T	☐ DELETE
NAME	MARSH, WILLIAM D.	
Street Address	36148 LAKE UNITY ROAD	
City, St, Zip	FRUITLAND PARK FL	
TITLE		☐ DELETE
NAME		
Street Address		
City, St, Zip		
TITLE		☐ DELETE
NAME		
Street Address		
City, St, Zip		
TITLE		☐ DELETE
NAME		
Street Address		
City, St, Zip		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change	☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY, ST, ZIP		
2.1 TITLE	☐ Change	☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY, ST, ZIP		
3.1 TITLE	☐ Change	☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY, ST, ZIP		
4.1 TITLE	☐ Change	☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY, ST, ZIP		
5.1 TITLE	☐ Change	☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY, ST, ZIP		
6.1 TITLE	☐ Change	☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY, ST, ZIP		

14. I hereby certify that the information supplied within this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or is added in a manner substantially similar to the above.

SIGNATURE: Timothy J. Hurst (Res.) 1-20-96 904-326-2150
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)