

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G75032**

(4)

1. Corporation Name

AMERICAN ALUMINUM, INC.



Principal Place of Business

% ROBERT A. DICKINSON
460 SOUTH INDIANA AVE.
ENGLEWOOD FL 34223-3702

Mailing Address

% ROBERT A. DICKINSON
460 SOUTH INDIANA AVE.
ENGLEWOOD FL 34223-3702

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

DICKINSON, ROBERT A.
460 SOUTH INDIANA AVE.
ENGLEWOOD FL 33533

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 607.1508, 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Officer or Director

Signature of Secretary or Agent for Service of Process

Date

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	VAN TILBURG, GEORGE	
STREET ADDRESS	550 LEACH ST	
CITY-STATE-ZIP	ENGLEWOOD, FL 00000	
TITLE	V	☐ DELETE
NAME	NICOL, WILLIAM H	
STREET ADDRESS	840 N ELM	
CITY-STATE-ZIP	ENGLEWOOD, FL 00000	
TITLE	S	☐ DELETE
NAME	VAN TILBURG, KATHERINE	
STREET ADDRESS	550 LEACH ST	
CITY-STATE-ZIP	ENGLEWOOD, FL 00000	
TITLE	T	☐ DELETE
NAME	DAVIS, CHRISTOPHER J	
STREET ADDRESS	550 LEACH ST	
CITY-STATE-ZIP	ENGLEWOOD FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-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-STATE-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), 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 on an attachment with an address.

SIGNATURE: *George Van Tilburg*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/96

Exempt From Filing

CR2E034 (12/95)