

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H73707

FILED
Jan 04, 2007
Secretary of State

Entity Name: SOUTHEASTERN ALUMINUM PRODUCTS, INC.

Current Principal Place of Business:

6701 SUEMAC PLACE
JACKSONVILLE, FL 32254 US

New Principal Place of Business:

4925 BULLS BAY HGWY
JACKSONVILLE, FL 32219 US

Current Mailing Address:

PO BOX 6427
JACKSONVILLE, FL 32236 US

New Mailing Address:

FEI Number: 59-2567831 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBISON, MARY A.
1 INDEPENDENT DR
SUITE 2600
JACKSONVILLE, FL 32202 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: JACKSON, WILLIAM K., JR.
Address: 6701 SUEMAC PLACE
City-St-Zip: JACKSONVILLE, FL 32254

Title: CD () Delete
Name: WRIGHT, JOHN R.,
Address: 6701 SUEMAC PLACE
City-St-Zip: JACKSONVILLE, FL 32254

Title: V () Delete
Name: JACKSON, JOSEPH T
Address: 6701 SUEMAC PL
City-St-Zip: JACKSONVILLE, FL 32254

Title: V () Delete
Name: WRIGHT, JOHN R JR
Address: 6701 SUEMAC PL
City-St-Zip: JACKSONVILLE, FL 32254

Title: V () Delete
Name: DOWD, JEFFREY E
Address: 6701 SUEMAC PL
City-St-Zip: JACKSONVILLE, FL 32254

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: JOHN R WRIGHT

CD

01/04/2007

Electronic Signature of Signing Officer or Director

Date