

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H73707

FILED
Jan 12, 2012
Secretary of State

Entity Name: SOUTHEASTERN ALUMINUM PRODUCTS, INC.

Current Principal Place of Business:

4925 BULLS BAY HWY
JACKSONVILLE, FL 32219 US

New Principal Place of Business:

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 (X)

Name and Address of Current Registered Agent:

ROBISON, MARY A.
501 RIVERSIDE AVE STE 600
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

OFFICERS AND DIRECTORS:

Title: DP
Name: JACKSON, WILLIAM K. JR.
Address: 4925 BULLS BAY HWY
City-St-Zip: JACKSONVILLE, FL 32219

Title: CD
Name: WRIGHT, JOHN R.
Address: 4925 BULLS BAY HWY
City-St-Zip: JACKSONVILLE, FL 32219

Title: V
Name: JACKSON, JOSEPH T
Address: 4925 BULLS BAY HWY
City-St-Zip: JACKSONVILLE, FL 32219

Title: V
Name: WRIGHT, JOHN R JR
Address: 4925 BULLS BAY HWY
City-St-Zip: JACKSONVILLE, FL 32219

Title: V
Name: DOWD, JEFFREY E
Address: 4925 BULLS BAY HWY
City-St-Zip: JACKSONVILLE, FL 32219

I hereby 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 all other like empowered.

SIGNATURE: JOHN R. WRIGHT

CD

01/12/2012

Electronic Signature of Signing Officer or Director

Date