

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 29, 2002 8:00 am**  
**Secretary of State**

07-29-2002 90001 044 \*\*\*150.00

**DOCUMENT # J58439**

1. Entity Name  
**CAMEO ALUMINUM, INC.**

Principal Place of Business

**5732 MT OLIVE RD  
 POLK CITY FL 33868  
 US**

Mailing Address

**PO BOX 748  
 AUBURNDAL FL 33823  
 US**

2. Principal Place of Business

3. Mailing Address

**335 Havendale Blvd**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Auburndale FL**

Zip

Country

Zip

**33823**

Country

4. FEI Number **59-2774089**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**WELSER, ANNA H  
 294 WINTER RIDGE BLVD  
 WINTER HAVEN FL 33881**

7. Name and Address of New Registered Agent

**Donald Baehr  
 Street Address (P.O. Box Number is Not Acceptable)  
 335 Havendale Blvd**

**Auburndale**

**FL**

**Zip Code 33823**

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 *Donald S. Baehr*  
 Signature, typed or printed name of registered agent and title if applicable.

**Donald S. Baehr**

**7-25-02**

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00  
 After September 13, 2002 Fee will be \$750.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P**  
 NAME **CAYSON, FRANK D.**  
 STREET ADDRESS **115 SUGAR CREEK RD**  
 CITY-ST-ZIP **WINTER HAVEN FL**

☐ Delete

TITLE **President**  
 NAME **Frank D. Cayson**  
 STREET ADDRESS **PO Box 748**  
 CITY-ST-ZIP **Auburndale FL 33823**

☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Frank D. Cayson*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7-25-02 863-984-0999**

CR2E034 (4/02)

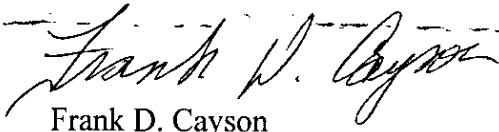
Attachment

#J58439

To Whom It May Concern,

The corporation did not receive the first uniform business report. Please accept the check in the amount of \$150.00 as we have changed our address.

Thank you,



Frank D. Cayson