

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000066785

FILED  
Feb 15, 2006  
Secretary of State

Entity Name: ADVANCED ALUMINUM CREATIONS, LLC

**Current Principal Place of Business:**

5830 12TH AVENUE SW  
NAPLES, FL 34116 US

**New Principal Place of Business:**

3673 EXCHANGE AVENUE  
SUITE 3  
NAPLES, FL 34104 US

**Current Mailing Address:**

5830 12TH AVENUE SW  
NAPLES, FL 34116 US

**New Mailing Address:**

3673 EXCHANGE AVENUE  
SUITE 3  
NAPLES, FL 34104 US

FEI Number: 75-3165435

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ADVANCED ALUMINUM CREATIONS  
5830 12TH AVENUE SW  
NAPLES, FL 34116 US

**Name and Address of New Registered Agent:**

ADVANCED ALUMINUM CREATIONS  
3673 EXCHANGE AVENUE  
SUITE 3  
NAPLES, FL 34104 US

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: STACEY ANDERSON

02/15/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ANDERSON, JOSEPH  
Address: 5830 12TH AVENUE SW  
City-St-Zip: NAPLES, FL 34116 US

Title: MGRM ( ) Delete  
Name: PULTZ, STACEY  
Address: 5830 12TH AVENUE SW  
City-St-Zip: NAPLES, FL 34116 US

Title: MGRM ( ) Delete  
Name: ANDERSON, MICHAEL  
Address: 5830 12TH AVENUE SW  
City-St-Zip: NAPLES, FL 34116 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ANDERSON, JOSEPH  
Address: 3673 EXCHANGE AVENUE #3  
City-St-Zip: NAPLES, FL 34104 US

Title: MGRM (X) Change ( ) Addition  
Name: ANDERSON, STACEY  
Address: 3673 EXCHANGE AVENUE #3  
City-St-Zip: NAPLES, FL 34104 US

Title: MGRM (X) Change ( ) Addition  
Name: ANDERSON, MICHAEL  
Address: 3673 EXCHANGE AVENUE #3  
City-St-Zip: NAPLES, FL 34104 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: STACEY ANDERSON

MGRM

02/15/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date