

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000002389

FILED
May 12, 2006
Secretary of State

Entity Name: IDEAL ALUMINUM PRODUCTS, L.L.C.

Current Principal Place of Business:

531 CODISCO WAY
SANFORD, FL 32771

New Principal Place of Business:

2000 BRUNSWICK LANE
DELAND, FL 32724

Current Mailing Address:

531 CODISCO WAY
SANFORD, FL 32771

New Mailing Address:

2000 BRUNSWICK LANE
DELAND, FL 32724

FEI Number: 59-3582845 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LEHMANN, WALTER W
531 CODISCO WAY
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

LEHMANN, WALTER W
2000 BRUNSWICK LANE
DELAND, FL 32724 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: WALTER LEHMANN

05/12/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PAGE, CLAYTON
Address: 112 WAYSIDE CT
City-St-Zip: SANFORD, FL 32771

Title: MGRM () Delete
Name: SELBY, C. THOMAS
Address: 300 INTERNATIONAL PKWY STE 130
City-St-Zip: HEATHROW, FL 32746

Title: MGRM () Delete
Name: LEHMANN, WALTER
Address: 343 OAK LEAF CIRCLE
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES:

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 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: WALTER LEHMANN

MGRM

05/12/2006

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