2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# M68276

Entity Name: OSCEOLA ALUMINUM, INC.

Current Principal Place of Business:

1651 KELLY AVENUE
KISSIMMEE, FL 34744 US

New Principal Place of Business:

Current Mailing Address:

1651 KELLY AVENUE
KISSIMMEE, FL 34744 US

New Mailing Address:

FEI Number: 59-2874327 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JOHNSON, BLAIR M.
425 SOUTH DILLARD STREET
WINTER GARDEN, FL 32787 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: PD ( ) Delete
Name: ELKINS, RUSSELL A
Address: 700 NANA AVE
City-St-Zip: ORLANDO, FL

Title: VPD ( ) Delete
Name: EADDY, PHILLIP S
Address: 1651 KELLY AVE
City-St-Zip: KISSIMMEE, FL 34744

Title: VPD ( ) Delete
Name: EADDY, PHILLIP M
Address: 1651 KELLY AVE
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ELKINS, RUSSELL A
Address: 700 NANA AVE
City-St-Zip: ORLANDO, FL 32809 US

Title: VPD (X) Change ( ) Addition
Name: EADDY, PHILLIP S
Address: 1651 KELLY AVE
City-St-Zip: KISSIMMEE, FL 34744 US

Title: VPD (X) Change ( ) Addition
Name: EADDY, PHILLIP M
Address: 1651 KELLY AVE
City-St-Zip: KISSIMMEE, FL 34744 US

I hereby certify that the information supplied with this filing does not qualify 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: RUSSELL ELKINS PD 01/16/2009

Electronic Signature of Signing Officer or Director Date