2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001540

Entity Name: ASHLEY ALUMINUM, LLC

FILED May 27, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5120 WEST CLIFTON STREET TAMPA, FL 33634

Current Mailing Address: New Mailing Address:

5120 WEST CLIFTON STREET 979 BATESVILLE ROAD TAMPA, FL 33634 GREER, SC 29651

FEI Number: 58-1960216 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NATIONSCORP REGISTERED AGENTS, INC. 526 E. PARK AVENUE TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition
Name: MALLMANN, JEANENE M Name:
Address: 5120 WEST CLIETON STREET

 Address:
 5120 WEST CLIFTON STREET
 Address:

 City-St-Zip:
 TAMPA, FL 33684
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 POWELL, MARTIN L
 Name:

 Address:
 979 BATESVILLE ROAD
 Address:

 City-St-Zip:
 GREER, SC 29651
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 POTSIC, ALAN P
 Name:

 Address:
 5120 WEST CLIFTON STREET
 Address:

 City-St-Zip:
 TAMPA, FL 33634
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 NEWMAN, LAUREL
 Name:

 Address:
 5120 WEST CLIFTON STREET
 Address:

 City-St-Zip:
 TAMPA, FL 33634
 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

 Name:
 FAULKNER, DUANE H
 Name:

 Address:
 979 BATESVILLE ROAD
 Address:

 City-St-Zip:
 GREER, SC 29651
 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name:ARMSTRONG, WILLIAM RName:ROBINS, STEVEN RAddress:979 BATESVILLE ROADAddress:979 BATESVILLE ROADCity-St-Zip:GREER, SC 29651City-St-Zip:GREER, SC 29651

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: R. STEVEN ROBINS MGR 05/27/2004