

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001540

Entity Name: ASHLEY ALUMINUM, LLC

FILED
Jan 27, 2005
Secretary of State

Current Principal Place of Business:

5120 WEST CLIFTON STREET
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

979 BATESVILLE ROAD
GREER, SC 29651

New Mailing Address:

FEI Number: 58-1960216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MALLMANN, JEANENE M
Address: 5120 WEST CLIFTON STREET
City-St-Zip: TAMPA, FL 33684

Title: MGRM () Delete
Name: POWELL, MARTIN L
Address: 979 BATESVILLE ROAD
City-St-Zip: GREER, SC 29651

Title: MGRM () Delete
Name: POTSIC, ALAN P
Address: 5120 WEST CLIFTON STREET
City-St-Zip: TAMPA, FL 33634

Title: MGRM () Delete
Name: NEWMAN, LAUREL
Address: 5120 WEST CLIFTON STREET
City-St-Zip: TAMPA, FL 33634

Title: MGR () Delete
Name: FAULKNER, DUANE H
Address: 979 BATESVILLE ROAD
City-St-Zip: GREER, SC 29651

Title: MGR () Delete
Name: ROBINS, STEVEN R
Address: 979 BATESVILLE ROAD
City-St-Zip: GREER, SC 29651

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: VAN LIERE, JAYNE
Address: 5120 WEST CLIFTON STREET
City-St-Zip: TAMPA, FL 33634

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 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: STEVEN R. ROBINS

MGR

01/27/2005

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