

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001540

Entity Name: ASHLEY ALUMINUM, LLC

FILED
May 22, 2006
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 ()
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:

Name and Address of New Registered Agent:

INCORPORATING SERVICES, LTD
1540 GLENWAY DRIVE
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/MANAGERS:

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: VAN LIERE, JAYNE
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: () Change () Addition
Name:
Address:
City-St-Zip:

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

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

Title: MGR (X) Change () Addition
Name: HAMILTON, CARA
Address: 979 BATESVILLE ROAD
City-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 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: CARA HAMILTON

MGR

05/22/2006

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