

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000002172

1. Entity Name

ALUMINUM ASSOCIATION OF FLORIDA, GREATER VOLUSIA

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90167 031 ****61.25

Principal Place of Business

3319 MAGUIRE BLVD
STE 155
ORLANDO FL 32803
US

Mailing Address

P O BOX 140532
ORLANDO FL 33432-7462
US

2. Principal Place of Business

1650 S. Dixie Highway
Suite, Apt. #, etc.
Suite 500

3. Mailing Address

1650 S. Dixie Highway
Suite, Apt. #, etc.
Suite 500

City & State

Boca Raton, FL

City & State

Boca Raton, FL

4. FEI Number

59-3240358

Applied For

Not Applicable

Zip

33432

Country

USA

Zip

33432

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CLASSE, WANDA
3319 MAGUIRE BLVD
SUITE 155
ORLANDO FL 32803

7. Name and Address of New Registered Agent

Name
Jim McMullen
Street Address (P.O. Box Number is Not Acceptable)
1650 S. Dixie Highway, Suite 500
City
Boca Raton, FL Zip Code
33432

8. 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

Executive Director

4/26/00

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GARDENR, MICHAEL
21 SUNSHINE BLVD
ORMOND BEACH FL 32174 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
PATTERSON, JAMES
617A COMMERCIAL DR
HOLLY HILL FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
BELISLE, ANNETTE
1360 N NOVA BLVD
DAYTONA BEACH FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
M
CLASSE, WANDA
3319 MARQUIRE BLVD #155
ORLANDO FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S/T/D ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P/D ☒ Change ☐ Addition
Holly Hill, FL 32117

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
M,
Jim McMullen
1650 S. Dixie Highway, Ste. 500
Boca Raton, FL 33432 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/00

(904) 253-0631

Date

Daytime Phone #