

**2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Feb 07, 2005 8:00 am**  
**Secretary of State**

02-07-2005 90070 030 \*\*\*150.00

**DOCUMENT # P00000015588**  
 1. Entity Name  
**G. & L. ALUMINUM, INC.**



Principal Place of Business: **1014 VIRGINIA CT. PANAMA CITY FL 32409**  
 Mailing Address: **1014 VIRGINIA CT. PANAMA CITY FL 32409**

40014404



1st MOORE CR2E034 (10/04)

2. Principal Place of Business: **7303 E 11th St.**  
 Suite, Apt. #, etc.

3. Mailing Address: **7303 E 11th St.**  
 Suite, Apt. #, etc.

City & State: **Panama City FL.**

4. FEI Number: **59-3112481**  
 Applied For:  Not Applicable

Zip: **32404** Country: **USA**

5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**CHURUKIAN, GORDON JOSEPH**  
**1014 VIRGINIA CT.**  
**PANAMA CITY FL 32404**

7. Name and Address of New Registered Agent  
 Name: **Churukian Gordon Joseph**  
 Street Address (P.O. Box Number is Not Acceptable): **7303 E 11th St.**  
 City: **Panama City** FL Zip Code: **32404**

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. I am familiar with, and accept the obligations of registered agent.  
 SIGNATURE: *Gordon J. Churukian* **Gordon J. Churukian** Director Manager **2/1/05**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CHURUKIAN, GORDON JOSEPH	
STREET ADDRESS	1014 VIRGINIA CT.	
CITY-ST-ZIP	PANAMA CITY FL 32404	
TITLE	D	<input type="checkbox"/> Delete
NAME	ADKINS, WAYNE LARRY JR.	
STREET ADDRESS	4712 CHEROKEE HEIGHTS RD.	
CITY-ST-ZIP	PANAMA CITY FL 32404	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Churukian, Gordon Joseph	
STREET ADDRESS	7303 E 11th St.	
CITY-ST-ZIP	Panama City FL 32404	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 607, 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: *Gordon J. Churukian* **Gordon J. Churukian** **2/1/05** **(850) 866-3717**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #