

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000027502

FILED
Apr 12, 2007
Secretary of State

Entity Name: BUCKEYE CONSTRUCTION & ALUMINUM, INC.

Current Principal Place of Business:

1020 PINE ISLAND ROAD
208-209
CAPE CORAL, FL 33909

New Principal Place of Business:

Current Mailing Address:

1020 PINE ISLAND ROAD
208-209
CAPE CORAL, FL 33909

New Mailing Address:

FEI Number: 65-0992870 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FULLER, SCOTT
1724 SW 20TH TERR.
CAPE CORAL, FL 33991 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FULLER, SCOTT
Address: 1724 SW 20TH TERR.
City-St-Zip: CAPE CORAL, FL 33991

Title: SD () Delete
Name: FULLER, SEAN
Address: 1835 CORNWALLIS PKWY
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCOTT A. FULLER

PD

04/12/2007

Electronic Signature of Signing Officer or Director

_____ Date