

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000052545

FILED
Apr 30, 2009
Secretary of State

Entity Name: S & B METAL PRODUCTS OF EAST FLORIDA, INC.

Current Principal Place of Business:

1821 HOLSONBACK DRIVE
DAYTONA BEACH, FL 32117

New Principal Place of Business:

1811 HOLSONBACK DRIVE
DAYTONA BEACH, FL 32117

Current Mailing Address:

2060 CASE PKWY
TWINSBURG, OH 44087

New Mailing Address:

FEI Number: 30-0088316 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALLIETTE, PAUL R
799 FREELING DR
SARASOTA, FL 34242 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: D () Delete
Name: BALLIETTE, PAUL R
Address: 799 FREELING DRIVE
City-St-Zip: SARASOTA, FL 34242

Title: DT () Delete
Name: BALLIETTE, CINDY
Address: 799 FREELING DRIVE
City-St-Zip: SARASOTA, FL 34242

Title: S () Delete
Name: KING, MARIANNE
Address: 2060 CASE PKWY
City-St-Zip: TWINSBURG, OH 44087

Title: PD () Delete
Name: CAMPBELL, STEPHEN R
Address: 3024 GRASSLANDS DR
City-St-Zip: LAKELAND, FL 33811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

I hereby certify that the information supplied with this filing does not qualify 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: PAUL R BALLIETTE

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date