

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000061380

Entity Name: JW ALUMINUM INC

FILED
Jan 26, 2006
Secretary of State

Current Principal Place of Business:

787 SW ALTON CIRCLE
PORT SAINT LUCIE, FL 34953 US

New Principal Place of Business:

Current Mailing Address:

787 SW ALTON CIRCLE
PORT SAINT LUCIE, FL 34953 US

New Mailing Address:

FEI Number: 20-0988935

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILT, JOHN E
787 SW ALTON CIRCLE
PORT SAINT LUCIE, FL 34953 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: DIR () Delete
Name: WILT, JOHN E
Address: 787 SW ALTON CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: DIR () Delete
Name: WILT, RUTH A
Address: 787 SW ALTON CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: P () Delete
Name: WILT, JOHN E
Address: 787 SW ALTON CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: VP () Delete
Name: WILT, RUTH A
Address: 787 SW ALTON CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: TREA () Delete
Name: WILT, JOHN E
Address: 787 SW ALTON CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: SEC () Delete
Name: WILT, RUTH A
Address: 787 SW ALTON CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

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:

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: JOHN E. WILT

Electronic Signature of Signing Officer or Director

PRES

01/26/2006

Date