

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000013161

Entity Name: LAKE COUNTRY ALUMINUM, INC.

FILED
Feb 27, 2008
Secretary of State

Current Principal Place of Business:

154 PERSIMMON TRAIL
LAKE PLACID, FL 33852 US

New Principal Place of Business:

Current Mailing Address:

154 PERSIMMON TRAIL
LAKE PLACID, FL 33852 US

New Mailing Address:

FEI Number: 20-2225361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIDES, GARY L
4214 THOMPSON AVENUE
SEBRING, FL 33875 US

Name and Address of New Registered Agent:

SIDES, GARY L
154 PERSIMMON TRAIL
LAKE PLACID, FL 33852 US

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:

02/27/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: SIDES, GARY L
Address: 4214 THOMPSON AVENUE
City-St-Zip: SEBRING, FL 33875 US

Title: DVPS () Delete
Name: MOORE, MICHAEL W
Address: 4214 THOMPSON AVENUE
City-St-Zip: SEBRING, FL 33875 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: SIDES, GARY L
Address: 154 PERSIMMON TRAIL
City-St-Zip: LAKE PLACID, FL 33852 US

Title: DVPS (X) Change () Addition
Name: MOORE, MICHAEL W
Address: 9426 HAPPYWOODS DRIVE
City-St-Zip: SEBRING, FL 33875 US

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: GARY SIDES

DPT

02/27/2008

Electronic Signature of Signing Officer or Director

Date