## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000141846

Entity Name: SEFFNER ALUMINUM, INC.

FILED Apr 22, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2342 BOGAERT ROAD DOVER, FL 33527

Current Mailing Address: New Mailing Address:

P. O. BOX 6482 SEFFNER, FL 33583

FEI Number: 20-3714499 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THOMAS, RANDAL M
2342 BOGAERT ROAD
DOVER, FL 33527 US

KIMMEL, LESLIE N P
2342 BOGAERT ROAD
DOVER, FL 33527 US

DOVER, FL 33527 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: LESLIE N. KIMMEL 04/22/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

 Name:
 KIMMEL, JR., LESLIE N
 Name:

 Address:
 2342 BOGAERT ROAD
 Address:

 City-St-Zip:
 DOVER, FL 33527
 City-St-Zip:

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: KIMMEL, JR., SAMUEL R Name: THOMAS, RANDAL M VP

Address: 2342 BOGAERT ROAD Address: 2342 BOGAERT ROAD City-St-Zip: DOVER, FL 33527 DOVER, FL 33527

Title: ST ( ) Delete Title: ST (X) Change ( ) Addition

 Name:
 CARLISLE, ALLEN M
 Name:
 CARLISLE, ALLEN M ST

 Address:
 4902 C.P KEEN ROAD
 Address:
 4902 C.P KEEN ROAD

 City-St-Zip:
 PLANT CITY, FL 33567
 City-St-Zip:
 PLANT CITY, FL 33567

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: LESLIE N. KIMMEL P 04/22/2009