

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000165608

Entity Name: STOKES ALUMINUM, INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

777 ROBIN AVE
PALM HARBOR, FL 34683

New Principal Place of Business:

5246 ALLAMANDA DR
NEW PORT RICHEY, FL 34652 US

Current Mailing Address:

3172 HARVARDSTON LOOP
HOLIDAY, FL 34691

New Mailing Address:

5246 ALLAMANDA DR
NEW PORT RICHEY, FL 34652 US

FEI Number: 76-0810621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOKES, JEREMY
3172 HARVARDSTON LOOP
HOLIDAY, FL 34691 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: P () Delete
Name: STOKES, JEREMY
Address: 3172 HARVARDSTON LOOP
City-St-Zip: HOLIDAY, FL 34691

Title: S () Delete
Name: STOKES, ALONDA
Address: 3172 HARVARDSTON LOOP
City-St-Zip: HOLIDAY, FL 34691

Title: V (X) Delete
Name: BASS, JOHN
Address: 17043 TORVEST COURT
City-St-Zip: LAND O LAKES, FL 34638

Title: T (X) Delete
Name: BASS, PETER
Address: 1791 MARSH WREN WAY
City-St-Zip: PALM HARBOR, FL 34683

Title: VP () Delete
Name: TSOLKAS, STEPHEN
Address: 777 ROBIN AVE
City-St-Zip: PALM HARBOR, FL 34683

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:

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: JEREMY STOKES

P

04/28/2008

Electronic Signature of Signing Officer or Director

Date