

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000087646

Entity Name: ALL SEASONS ALUMINUM, INC.

**FILED**  
**Feb 19, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4508 EIGHTH AVENUE NORTH  
ST. PETERSBURG, FL 33713

**New Principal Place of Business:**

5572 64TH WAY NORTH  
ST. PETERSBURG, FL 33713

**Current Mailing Address:**

4508 EIGHTH AVENUE NORTH  
ST. PETERSBURG, FL 33713

**New Mailing Address:**

FEI Number: 27-3785702

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KENDALL, JOHN  
4508 EIGHTH AVENUE NORTH  
ST. PETERSBURG, FL 33713 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

**OFFICERS AND DIRECTORS:**

Title: DPST  
Name: KENDALL, JOHN  
Address: 4508 EIGHTH AVENUE NORTH  
City-St-Zip: ST. PETERSBURG, FL 33713

Title: VP  
Name: KENDALL, HELEN  
Address: 4508 8TH AVE NORTH  
City-St-Zip: ST PETERSBURG, FL 33713

I hereby 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 all other like empowered.

SIGNATURE: JOHN KENDALL

MR

02/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date