

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000034234

Entity Name: LIBERTY ALUMINUM CO.

FILED
Apr 07, 2009
Secretary of State

Current Principal Place of Business:

5613 6TH ST. W.
LEHIGH ACRES, FL 33971 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 7331
FT MYERS, FL 33911 US

New Mailing Address:

5613 6TH ST. W.
LEHIGH ACRES, FL 33971 US

FEI Number: 65-0409622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOWNDES, JAMES E
5613 6TH ST. W.
LEHIGH ACRES, FL 33971 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: PSTD () Delete
Name: LOWNDES, JAMES E
Address: 12171 HAMPTON GREENS COURT
City-St-Zip: FT MYERS, FL 33913 US

Title: C () Delete
Name: LOWNDES, JAMES E
Address: 12171 HAMPTON GREENS COURT
City-St-Zip: FT MYERS, FL 33913 US

Title: V () Delete
Name: GUERIN, JAMES D
Address: 36400 WASHINGTON LP RD
City-St-Zip: PUNTA GORDA, FL 33982

Title: VP (X) Delete
Name: NORTHAM, DOUGLAS
Address: 2901 21ST ST, W
City-St-Zip: LEHIGH ACRES, FL 33971

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:

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: JAMES E LOWNDES

PRES

04/07/2009

Electronic Signature of Signing Officer or Director

Date