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FILED
May 08 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000089176 (9)

1. Corporation Name

FLORIDA WEST ALUMINUM INC.

Principal Place of Business

Mailing Address

9458 GRAY FOX DRIVE
SPRING HILL FL 34613
US

9458 GRAY FOX DRIVE
SPRINGHILL FL 34613
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/08/1994

4. FEI Number

59-3305989

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

HANSEN, PETER C
9458 GRAY FOX DRIVE
SPRINGHILL FL 34613

10. Name and Address of New Registered Agent

81 Name

Hansen Peter C

82 Street Address (P.O. Box Number is Not Acceptable)

13441 Lelani Dr

83

84 City

Brooksville

FL

85 Zip Code

34614

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME HANSEN, PETER C
STREET ADDRESS 9458 GRAY FOX DRIVE
CITY-ST-ZIP SPRINGHILL FL

TITLE VD ☐ DELETE

NAME MORAN, KIMBERLY
STREET ADDRESS 9458 GRAY FOX DRIVE
CITY-ST-ZIP SPRING HILL FL

TITLE ST ☐ DELETE

NAME HANSEN, NANCY E
STREET ADDRESS 9458 GRAY FOX DRIVE
CITY-ST-ZIP SPRINGHILL FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME Hansen Peter C
1.3 STREET ADDRESS 13441 Lelani Dr
1.4 CITY-ST-ZIP Brooksville, FL 34614

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Peter C. Hansen

4-14-98 (352) 799-0734

CP2E034 (10/97)