2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000081508

Entity Name: TERRY VANDERWIER CASTING, INC.

5424 RIVERWOOD RD N

ST. AUGUSTINE, FL 32092 US

Address:

City-St-Zip:

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	ERWOOD RO IGUSTINE, FL			
Current Mailing Address:			New Mailing Address:	
	E WASHINGT WA 98056	ON BLVD N US		
FEI Number	: 59-3397033	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of	Current Registered Agent:	Name and Address o	f New Registered Agent:
5424 RIVE	WIER, MARIA ERWOOD RD IGUSTINE, FL	N		
The above in the State	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,
SIGNATU				
Election Co		nic Signature of Registered Ag	ent	Date
	S AND DIREC		ADDITIONS/CHANGI	ES TO OFFICERS AND DIRECTORS
Title: Name:	PD (VANDERWIEF)Delete R MARIA T	Title: Name:	() Change () Addition
Address:	5424 RIVERV		Address:	
City-St-Zip:		STINE, FL 32092	City-St-Zip:	
Title:	S () Delete	Title:	() Change () Addition
Name:	VANDERWIE	•	Name:	() change () / ladition
Address:	5424 RIVERV	*	Address:	
City-St-Zip:	SAINT AUGUS	STINE, FL 32092	City-St-Zip:	
Title:	VP () Delete	Title:	() Change () Addition
Name:	me: VANDERWIER, SEAN M dress: 5424 RIVERWOOD ROAD NORTH		Name:	· · · · · · · · · · · · · · · · · · ·
Address:			Address:	
City-St-Zip:	ST. AUGUSTII	NE, FL 32092 US	City-St-Zip:	
Title:	,) Delete	Title:	() Change () Addition
Name:	VANDERWIE	R, CHRISTOPHER G	Name:	

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.

Address:

City-St-Zip:

SIGNATURE: MARIA T. VANDERWIER PD 03/24/2009