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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # V51819 1. Corporation Name

LAKE ALFRED ALUMINUM, INC.

Principal Place of Business		Mailing Address			I (EBI) Bilodi diidi siddi ibidi iidid sair d	<b>                                   </b>	841 01311 100 <del>1</del>
P.O. BOX 9504		P.O. BOX 9504					
WINTER HAVEN FL 33883-9504		WINTER HAVEN FL 33883-9504		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed	THIS ST ACE	
					07/17/1992		
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	App	lied For
21	ace of business	26			59-3140925	<u> </u>	Applicable.
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			_	\$8.75 Ac	dditional
22	,	27			5. Certifcate of Status Desired	Fee Req	quired
City & State		City & State		6. Election Campaign Financing	\$5.00 N	Мау Ве	
23		28			Trust Fund Contribution .	Added to	Fees
Zip	Country	Zip	Countr	гу	8. This corporation owes the current year		
24	25	29	30		Personal Property Tax.		□No
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Registe	red Agent	
IONI	C DAVMOND I		8	1 Name	Daymond L.		
JONES, RAYMOND L. 105 E ALFRED ST			8		ddress (P.O. Box Number is Not Acceptable)		
	E ALFRED FL 33850		L		.0.85,. 9504		
LAN	MILKED LE 22020		8	3 1	inter Hiven Fl.31383		
			8		211 1 211 1 211 1 2 2 2 2 2 2 2 2 2 2 2	85 Zip C	ode .
						<u>rl</u>	
				<del></del>			ragistarad
office or re	existered agent or both in the Sta	ate of Florida. Such change was at	uthorized b	v the corool	corporation submits this statement for the purporation's board of directors. I hereby accept the	se of changing its r appointment as regi	registered jistered
office or re	existered agent or both in the Sta	0502 and 607.1508, Florida Statute ate of Florida. Such change was a ligations of, Section 607.0505, Flor	uthorized b	v the corool	corporation submits this statement for the purpor ration's board of directors. I hereby accept the a	se of changing its rippointment as regi	registered istered
office or re agent. I ai SIGNATURE	egistered agent, or both, in the Sta m familiar with, and accept the obl	ate of Florida. Such change was at ligations of, Section 607.0505, Flor	uthorized b rida Statute	y the corpo	ration's board of directors. I hereby accept the a	ippolitiment as regi	registered istered
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14. 1 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP